

Meeting Date: August 23, 2018

Attendees:

Attended in Person: CEI, GIHN, Right Door and Tuscola

Attended by Phone: BABH, CEI, CMHCM, Huron, LifeWays, MCN, Newaygo, Saginaw and Shiawassee

MSHN Staff: Todd L., Dan D., Joe W. , Sandy G. & Kim Z.

KEY DISCUSSION TOPICS

- Review & approve minutes
- Review & approval of agenda for today's meeting
- Performance Measure Update
- Performance Improvement Project
- Retained Contract Functions
- Policy/Procedure Review
- MSHN Compliance Plan
- FY18 Balanced ScoreCard
- MSHN Priority Measures Performance Report
- MDHHS QIC Meeting Updates
- Diabetes Protocol Follow Up
- MDHHS Site Review Updates

✓ **KEY DECISIONS**

- Review & Approve Minutes- The minutes from 6/28/18 were approved as submitted
- Review & approved agenda without revisions
- Performance Measure Update
 - ✓ PI Portal- REMI
 - Dan Dedloff demonstrated the use of REMI for PI submissions
 - It is expected that the submissions for FY18Q3 will be uploaded through REMI
 - Instructions on how to complete this task will be sent out on Monday
 - MSHN will review the final summary report provided for the CMHSPs to ensure that it is properly working in REMI
 - Need to provide the information to the ITC
 - ✓ Satisfaction Surveys
 - MDHHS indicated that they would most likely not distribute the MHSIP and YSS
 - Searching for a vetted tool
- Performance Improvement Projects
 - ✓ FY18 PIP
 - Reviewed the comments/revisions requested from HSAG for our draft report
 - Reviewed the project specifications and identified the points of clarification and edits that needed to be made to the project prior to submission
 - Point made to include issues of the comparative data and the difference in the population between the Health Plans and the PIHP/CMHSP
 - All recommended revisions were approved and will be submitted to HSAG by August 27th
 - ✓ RAS/RSA
 - At least half of the CMHSPs are still using these tools
 - Discussion will occur next month for the use of these tools region wide again
- Retained Contract Functions Update – Critical
 - ✓ Reviewed the summary data
 - ✓ No outliers - Information consistent with previous quarters

- ✓ The data is influenced by the accuracy of the reporting and the population types that are served by each CMHSP
- ✓ Request that revised numbers of individuals served be sent to Emily at CEI by November 9th (Medicaid only)
- ✓ Discussion in November to update any categories or if there are any additional pieces of information that could be useful. Content experts related to the critical incident are invited to attend for the discussion.
- Policy/Procedure Review - Compliance
 - ✓ The policies and procedures for Compliance were reviewed
 - ✓ Minor changes made to the polices except for the Fraud and Abuse investigations and reporting - changes made based on the requirements from the OIG
 - ✓ Consider combining the fraud and abuse and investigations policy with the Compliance Reporting and investigations - The committee recommends combining the two policies
 - ✓ Required reporting was updated to include the quarterly compliance reporting
 - ✓ Revised policies will be sent out to the CMHSPs.
- MSHN Compliance Plan
 - ✓ The plan has been reviewed internally by MSHNs Compliance Committee
 - ✓ Changes included clarification regarding the addition of the new requirements by the OIG, inclusion of references to the Regional Compliance Committee, the removal of outdated items, revisions of definitions, and terminology clarifications to aid in understanding
 - ✓ The OIG reporting form was reviewed – this is a new requirement
 - Disenrollment section was highlighted, and the current mandate to include any staff versus staff who have been terminated for cause involving fraud and abuse was discussed. Clarification is being sought on this.
 - The activities tab examples were discussed which contain areas which are not fraud/abuse. Clarification is being sought on this.
- FY18 Balanced Scorecard
 - ✓ Access and timeliness standards have improved, but showed a decline during FY17/18
 - ✓ The State and Federal timeliness standards will now be a quarterly indicator in hopes of seeing a continued improvement in the standard
- MSHN Priority Measure Performance Report
 - ✓ Reviewed the Diabetes Monitoring, screening and follow up to hospitalization
 - ✓ MSHN above the established standards
- MDHHS QIC Meeting Updates
 - ✓ MDHHS is not going to use the MHSIP and YSS anymore
 - ✓ They are looking for a new satisfaction survey which will hopefully be a single survey which covers a broader population.
 - ✓ A MDHHS workgroup is being formed to discuss updating the Performance Indicator (PI) and HEDIS measures process. Kim Zimmerman and Joe Wager will be MSHN's representatives on the workgroup
- Diabetes Protocol Discussion
 - ✓ Follow Up Discussion: QI was asked during a previous meeting to choose an option for coordination and identification of individuals who need the diabetes testing
 - ✓ QIC choose option B: On a quarterly basis MSHN pulls a list of consumers with open care alerts in ICDP and verifies with each CMHSP that the information is correct for its consumers. Once confirmed by each CMHSP, MSHN would send each MHP a list of that health plan's members who have not obtained a screening.
- MDHHS Site Review Updates

	<ul style="list-style-type: none">✓ The final exit interview will be held on 8/27/18✓ The initial report is that the reviews have gone well✓ There may still be 2 or 3 repeat citations which will be noted during the exit interview but the work to prepare for the reviews was evident in how well the reviews have gone.
✓ KEY DATA POINTS/DATES	<ul style="list-style-type: none">• Next Meeting: September 27, 2018