

Meeting: Regional Compliance Committee

Meeting Date: June 19, 2020

Attendees:

CEI, CMHCM, GIHN, Huron, LifeWays, MCN, Right Door, Saginaw, Shiawassee and Tuscola

MSHN Staff: Kim Z.

Not Present: BABH and Newaygo

*This meeting was held by zoom only

KEY DISCUSSION TOPICS

- Agenda Review
- Compliance Training
- Charter Review
- Data Mining
- FY21 Training Grid
- Standard Form-Disclosure and Ownership
- Other
- External Monitoring and Auditing

✓ **KEY DECISIONS**

- Additions to Agenda
 - ✓ No additions or revisions
- Compliance Training
 - ✓ Available now in Relias
 - ✓ Any recommendations for improvement can be given to Kim
 - ✓ She will be meeting with PIHP compliance officers for post-test development. The test will be brought to this group for review. Agreed upon 80% threshold for pass/fail on test. Will include an attestation statement.
 - ✓ A question was raised whether CMH's are required to use this? Agreed that this as a standard template, but it can be customized for local features. OIG has reviewed and approved this template so basic template should be used.
- Charter Review
 - ✓ Team reviewed the current charter and agreed that responsibilities and duties are still appropriate
 - ✓ Meetings occur every other month
- Data Mining
 - ✓ Multiple case managers providing services to the same consumer was discussed
 - Valid reasons to be identified such as case transferred, someone on leave, etc.
 - ✓ Kim will give us the specific citations from Medicaid and the algorithms being used
 - ✓ Due date of July 6th for response, but is somewhat flexible
 - ✓ Same three measures will be done again for Q2 but after this will pick a different one
 - ✓ The death audit comparison with encounters will be done on an ongoing quarterly basis
 - ✓ What could we do for Q3? Kim will check with the other PIHP's. Give Kim any areas that CMH's are currently looking at. Verification of billing available, third party payers and coordination of benefits was suggested as a possible data mining activity
- FY21 Training Grid
 - ✓ Carolyn Tiffany joined for a review of the training grid that is included as an attachment in provider contracts. She noted as a first step MSHN does an internal review against any contract changes. SUD providers have offered input. Carolyn is bringing to this group for review. Amy Dillon is reviewing with training coordinators group, then the grid will go to provider network council at end of July. Goal is to go to Ops Council in August

| | |
|--|---|
| | <ul style="list-style-type: none"> ✓ Updates <ul style="list-style-type: none"> ○ DECA training is a contract requirement prior to conducting assessment ○ LOCUS doesn't require refresher and change to 90 days of hire instead of 30. ○ Question about whether annual refreshers are required or not ○ MHFA for SUD providers within 120 days of hire. MSHN has a trainer who may have capacity. ○ Advanced Directives, Grievances and Appeal training ✓ Team to review by next Friday giving any feedback to carolyn.tiffany@midstatehealthnetwork.org. • Standard Form – Disclosure and Ownership <ul style="list-style-type: none"> ✓ What is our response to providers (inpatient psychiatric) around wording of "Managing Employees" on the disclosure and ownership section of the contract attachment. ✓ One provider said they had no managing employees. Managing employees are supposed to be identified for conducting various background checks. ✓ Educate provider on the requirements, have discussion and dialogue and then if necessary, communicate contract implications. ✓ Is there some training or a guidance documents available? Providers still have to complete an application for each individual CMH. ✓ Carolyn working with Central on an on-line application to present that to provider network council for potential broader adoption. The disclosure and ownership is part of the on-line application • Other <ul style="list-style-type: none"> ✓ COVID-19 Updates: Website being updated. Governor signed state of emergency through July 16. Telehealth expected to be continued through this time. Memo dated 4/8/20 on Plan of Services and Due Process has been rescinded. Amendments and review of PCPs can continue now as they were prior to COVID-19. Adverse benefit determinations will be required as per normal practices. Discussed reopening plans. MSHN is 100% remote and will continue until further notice. ✓ Compliance related performance measures: Kim introduced topic about MSHN's balanced scorecard and whether the Regional Corporate Compliance Committee should have a scorecard related to compliance measures. Kim will pull together some ideas from what data we already have. Will discuss at our next meeting ✓ CLS Progress Notes: Tabled to next meeting ✓ Some MEV's have been delayed but will still be held. The audits are being done via desk audit as much as possible. Expect to contact CMH's that were postponed mid-July and will reschedule to fit CMH's schedules ✓ Ken B noted a blog on compliance and Department of Justice review and guidance for best practices. Ken will send information along. • External Monitoring and Auditing <ul style="list-style-type: none"> ✓ HSAG site reviews: No results yet on PMV review, but review went well. Some follow-up questions on performance indicators. Expecting full compliance. New auditors this year. Performance Improvement Plan information due in July. ✓ MDHHS site reviews: Occurring over the summer. Extensive as includes SED and Child Waiver along with HSW. |
| <ul style="list-style-type: none"> ✓ KEY DATA POINTS/DATES | <ul style="list-style-type: none"> • Next Meeting: August 21, 2020 (3rd Friday of every other month from 10:00am – 12:00pm) |