

Meeting Date: September 26, 2019

***Attendance by phone**

- MSHN – Sandy Gettel*
- MSHN – Joe Wager
- MSHN – Sherry Donnelly*
- Bay – Sarah Holsinger
- CEI – Elise Magen
- Central – Kara Laferty
- Gratiot – Michelle Stillwagon
- Huron – Levi Zagorski
- Lifeways – Gina Costa*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw – Julie McCulloch*
- Shiawassee –Becky Dohring
- The Right Door – Susan Richards*
- Tuscola – Jackie Shillinger

Guests

- CEI – Bradley Allen*
- CEI – Lindsey Michalik

KEY DISCUSSION TOPICS

- 1) Welcome and introductions-
- 2) Review & Approvals
 - a. Meeting Minutes,
 - b. Approve Minutes
 - c. Review QIC Action Plan (Review follow up actions items)
- 3) Performance Improvement Project (s):
 - a. RSA-Recovery Self-Assessment Provider/Administrator -Determine Action Steps
 - b. RSA-Recovery Self-Assessment RSA- Persons in Recovery
 - c. RSA Summary
 - d. Diabetes Monitoring-Review Interventions
- 4) Performance Measures Updates:
 - a. MSHN Priority Measure Performance Report
 - b. Critical Incident Summary Report F/U Discussion
 - c. Strategic Priorities (deferred)
 - d. QAPI Quarterly Report
- 5) Project Development/Discussion
 - a. HEDIS FUH Child/Adult Project Description (deferred)
 - b. BTPRC proposed modification to process and data
 - c. Performance Indicator Changes
 - e. FAQ Performance Indicators
- 6) Site Review Updates
 - b. HSAG PMV Review
 - c. HSAG Compliance Review-Onsite Review September 16th.
 - d. MDHHS Autism Review-Corrective Action Plan Submitted.
- 7) MDHHS Updates
 - a. Updates from MDHHS PI Work Group-Draft Indicators
 - b. Amendment- Satisfaction Surveys
- 8) a. Primary/Secondary contacts for projects

✓ KEY DECISIONS

- 2) Review & Approvals
 - b. Meeting Minutes from 8-22-2019 approved with no changes.
 - c. All Action Items have been completed from 8-22-2019. BTPRC and RSA Reports were sent out. Performance Indicators Corrective Action Plan were all received as applicable.
- 3) Performance Improvement Project (s):
 - a.-c All RSA Summaries approved. The comprehensive score was reviewed for RSA Provider (4.18), Administrator (4.24), and Persons in Recovery (4.28).All sub categories were reviewed and were above 3.50. Reviewed questions that were below 3.5. The lowest questions were 23-People in recovery are encouraged to help staff with the development of new groups, programs, or services.25-People in recovery are encouraged to attend agency advisory boards and management meetings.29-Persons in recovery are involved with facilitating staff trainings and education at this program. All of which were in the Involvement Subcategory.

	<p>d. Interventions that were prioritized in the PIP were reviewed for action and progress by each CMHSP. This was documented on the intervention sheet that will be used to update the PIP. Areas of concern were identified related to understanding the data in ICDP, and the specifications used to include in the data se</p> <p>4) Performance Measures Updates:</p> <p>a. Available in Meeting Packet for review. Corrective action for QIC Measures will be identified next month.</p> <p>b. No additional discussion or questions related to actions steps to be completed by end of FY19Q4.</p> <p>d. Areas for improvement include-Trauma Informed Care, Access, IPHU consumer record standards, SUD consumer chart reviews.</p> <p>5) Project Development/Discussion</p> <p>b. Recommended changes reviewed-Utilization of the waiver spreadsheet for all BTP reviewed at committee. Discontinue the submission of the aggregated form to QIC. Project Description was updated to include changes.</p> <p>c. Training will occur on October 17 and 18 for the new Indicators. Draft performance indicators, data collection forms, templates and draft project description are located in Draft PI Folder, however, no additional action or discussion to occur until after the training.</p> <p>d. Reviewed FAQ. Questions related to Medicaid eligibility and authorization to complete a courtesy prescreen were discussed. A courtesy prescreen should be completed within 3 hours of request. Services should not be delayed as a result of waiting for payment authorization.</p> <p>6) Site Review Updates</p> <p>b. HSAG PMV Review Draft Report Received. There were no findings or recommendations.</p> <p>c. HSAG Compliance Review-Onsite Review September 16th. Preliminary Summary indicated recommendations and/or potential findings for UM, credentialing and performance measurement.</p> <p>d. MDHHS Autism Review-Waiting for response form MDHHS on Corrective Action Plan submitted.</p> <p>7) MDHHS Updates</p> <p>a. Updates from MDHHS PI Work Group-No change Training to occur on October 17th and 18th on new indicators.</p> <p>b. Amendment- FY19 Amendment removed the MSHIP and YSS from the contract. Satisfaction Surveys continue to be required.</p> <p>8) Other: a. Primary/Secondary contacts for projects</p>
<p>✓ ACTION STEPS</p>	<p>3) a-c. CMHSP Action-Review each assessment summary report for your CMHSP and determine local action steps based on subcategories below 3.5. Review questions below 3.5 to determine appropriate action. Regional Action-Review questions 23, 25, 29 to determine action steps for your CMHSP as applicable. This will be discussed at the next QIC for finalization of a regional plan.</p> <p>d. More information to be obtained related to specifications of ICDP inclusions and exclusions for the numerator and the denominator. Discussion to occur at Data Analytics.</p> <p>4) b. All unknowns should be updated in the critical incident reporting system as applicable for period ending in FY19Q4. Work with Sandy to validate data submitted.</p> <p>d. QAPI to follow up with Technical Assistance as needed to address the growth areas.</p> <p>5) b. Review Project Description. Reach out to Sandy for any questions or feedback. Revise and/or Finalize October 24th.</p> <p>c. Let Sandy know if you intend to attend the webinar or are interested in attending in person (4 seats left).</p> <p>d. Obtain information on how each CMHSP is counting those with Medicaid i.e. are those with retroactive Medicaid included in the PIHP report or is it only those eligible at the onset of treatment. Bring info to next meeting</p>
<p>✓ KEY DATA POINTS/DATES</p>	<ul style="list-style-type: none"> • Next QIC Meeting: October 24,10-12 at Gratiot • Next Regional BTPRC September 30, 1-2:30 at MSHN • Next Data Analytics October 8, 2019.