



Clinical Leadership Committee & Utilization Management Committee

Thursday, April 28, 2022, 1:00pm-3:00pm

Meeting Materials: [4-28-2022 Meeting Materials](#)

Zoom Link: <https://us02web.zoom.us/j/7242810917>

FY 2022 Meeting Calendar

October 28: Videoconference

February 24: Videoconference

June 23: Videoconference

November 18: Videoconference

March 24: Videoconference

July 28: Videoconference

December: No Meeting

April 28: Videoconference

August 25: Videoconference

January 27: Videoconference

May 26: Videoconference

September 22: Videoconference

Upcoming Deliverables:

April: MDHHS Service Disposition Annual Report (Provide Copy to MSHN)

May 1st: Q2 Service Authorization Denials Report

Attendees:

KEY DISCUSSION TOPICS

MSHN: Todd Lewicki, Skye Pletcher
Bay: Karen Amon, Joelin Hahn
CEI: Shana Badgley, Gwenda Summers, Joyce Tunnard, Elise Magen
Central: Julie Bayardo, Angela Zywicki
Gratiot: Taylor Hirschman, Sarah Bowman
Huron: Natalie Nugent, Levi Zagorski
Lifeways: Dave Lowe, Jen Fitch
Montcalm: Julianna Kozara, Sally Culey, Joe Cappon
Newaygo: Annette VanderArk, Kristen Roesler, Denise Russo-Starback
Saginaw: Kristie Wolbert, Vurlia Wheeler, Erin Nostrandt
Shiawassee: Jennifer Tucker
Right Door: Julie Dowling, Susan Richards
Tuscola: Julie Majeske

Guests:
MSHN: Amanda Ittner

TOPICS

1. Welcome & Roll Call
2. Review and Approve March Minutes, Additions to Agenda
3. Crystal Eddy (Shiawassee) Announcement
4. Breakout Sessions- CLC and UMC

CLC BREAKOUT

1. Network Adequacy Assessment (Amanda-MSHN)

UMC BREAKOUT

1. Interrater Reliability
2. Authorization Process Question
3. Individual Outliers Report
4. MCG FY22 Q1 Retrospective Review

JOINT SESSION

1. CFAP Workgroup Presentation and Notes (4-27-2022)-Should we volunteer to complete self-assessment?
2. What assessment tools are used by the CMHs, other than MCG Behavioral Health Criteria, to determine if a referral to a state hospital is needed. Do the assessment tools employed by the CMHs (including MCG) in the referral process include an analysis of substance misuse and/SUDs?
3. MCG/Indicia Workflow Challenges
4. Advocacy Opportunity for H2011 and T1023
5. ICDP Priority Measures Action
6. L 22-07- Wraparound Services
7. Informational Only:
 - a. FY23 MSHN Training Grid
 - b. Michigan Integration Updates
 - c. 2022-Q2 MSHN Behavioral Health Department Quarterly Report
 - d. MSHN HCBS Report 04-2022

4/28/2022 Agenda Item

Action Required

NETWORK ADEQUACY ASSESSMENT (CLC)

Amanda Ittner from MSHN to review draft NAA and seek committee input prior to finalizing. Done annually but need to update as the last was two years ago. Amanda reviewed the time and distance standards and the current NAA draft.

	CLC is asked to: 1) Make sure their respective data is correct in the NAA. 2) Provide any feedback/edits in the document and either provide to Todd or save in the CLC Box meeting folder. 3) Address the FY22 recommendations on page 66.	By Who	All CLC Members	By When	May 13, 2022
INTERRATER RELIABILITY (UMC)	HSAG requirement to have a regional policy/procedure for ensuring consistent application of review criteria for UM decision-making. Discussion about local IRR processes, possible use of MCG IRR module, other ideas for regionally consistent approach. Most CMHSPs currently use a peer review process but do not have formal IRR procedures.				
	Skye will provide examples of IRR policies and procedures from other PIHP/CMHSP so that UMC can make recommendations for MSHN regional IRR policy	By Who	Skye Pletcher	By When	May 26, 2022
AUTHORIZATION PROCESS QUESTION (UMC)	QIC is evaluating workflow processes for efficiency and is seeking input regarding different CMHSP authorization processes. Do any CMHSPs use a process where the primary caseholder does not enter all authorizations? No, most processes rely on caseholders to enter authorizations. Many CMHSPs using service packages to make it easier for caseholders				
	No action needed	By Who	N/A	By When	N/A
INDIVIDUAL OUTLIERS REPORT (UMC)	Discuss process for conducting quarterly outlier reviews. CMHSPs each received individual outlier reports prior to the meeting. Seeking feedback regarding accuracy of data, and questions/concerns/feedback to improve the report process. Most CMHSPs noted data discrepancies. Numbers of units of services appear to be significantly off in some cases.				
	Please email Skye specific case IDs where significant variance was noted. Skye will provide to TBD Solutions for additional data verification	By Who	All UMC Members	By When	May 15, 2022
MCG FY22 Q1 RETROSPECTIVE REVIEWS (UMC)	Aggregated Q1 report provided for review				
	No action needed	By Who	N/A	By When	N/A

CFAP WORKGROUP PRESENTATION AND DISCUSSION (CLC/UMC)	Discuss the 4/27/2022 CFAP meeting. Is anyone interesting in volunteering to complete the organizational CFAP self-assessment? Attendees of the 4/27 meeting voiced concern about fragmentation of care, poor consumer experience, potential delays in accessing services if the functions of assessment, service planning, and service delivery are completely separate and managed by separate entities.				
	Any CMHSP that would like to participate in an organizational self-assessment for CFAP should contact TBD Solutions directly to indicate interest.	By Who	CLC Members	By When	ASAP
MCG/INDICIA WORKFLOW CHALLENGES (CLC/UMC)	CMHSPs have reported challenges such as: multiple episodes created in Indicia when a person is screened every 24 hours while awaiting inpatient placement; Indicia doesn't differentiate between date of screening and date of hospital admission; how to "close" episode in Indicia when a person is screened and diverted. A meeting with a MCG clinical workflow consultant would be helpful to troubleshoot the identified issues.				
	Todd and Skye will work with MCG to schedule a consultation session for any CMHSPs that would like to participate.	By Who	Todd Lewicki; Skye Pletcher	By When	May 31, 2022
ADVOCACY OPPORTUNITY FOR H2011 AND T1023 (CLC/UMC)	Current MDHHS provider qualification requirements preclude individuals with human service BA from providing crisis services, however MiCAL staffing includes individuals with HS diploma and specialized crisis intervention training. Potential opportunity for advocacy with MDHHS. Todd reviewed a draft document which summarizes the issue and provides recommendations related to policy change and training requirements to allow BA-level human services to obtain a certification to provide crisis services. Committee support and approval for document to be used for additional advocacy with MDHHS				
	MSHN to advocate with MDHHS	By Who	Todd Lewicki	By When	
ICDP PRIORITY MEASURES ACTION (CLC/UMC)	Process by which care alerts in ICDP can be marked as "addressed" for measures where claims data may not be available (ie: Medicare/Medicaid duals). Supports clinical process for coordination.				
	Committee supports both recommendations that were made by QIC; No additional action needed	By Who	N/A	By When	N/A
L 22-07-WRAPAROUND SERVICES (CLC/UMC)	Discussion regarding proposed changes – do CMHSPs anticipate a significant increase in referrals? Some CMHSPs report that they have begun to see an increase in referrals to Wraparound. There is concern for the increased volume of referrals and lack of capacity of trained Wraparound facilitators. Additionally, supervision requirements for Wraparound programs are intensive and difficult to maintain. More frequent Wraparound facilitator opportunities needed to onboard new staff. There is a tremendous amount of pressure for the CMHSPs to address Wraparound service needs and child/family therapists, especially for foster cases. Foster care workers expecting CMHSPs to help facilitate foster care placement outside the scope of CMHSP responsibility; more education needed				

with local DHHS child welfare offices on CMHSPs roles and responsibilities. What is the current identified problem that expanding Wraparound is meant to address? CMHSPs are struggling with continuing to add services as a perceived “solution” to current issues that involve multiple community systems of care such as lack of adequate foster care homes, staffing shortages in all systems of care, and lack of incentives for parents to participate in the services that are offered to them. Enhanced collaboration among multiple systems of care (child welfare, juvenile justice, CMHSP/PIHP) is needed to address the complex issues contributing to statewide staffing shortages, service gaps, and lack of available resources to meet the needs of families & children.

CLC and UMC feedback will be shared with Operations Council	By Who	Todd Lewicki; Skye Pletcher	By When	
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- INFORMATIONAL ONLY (CLC/UMC):**
- a. FY23 MSHN TRAINING GRID
 - b. INTEGRATION UPDATES
 - c. 2022-Q2 MSHN Behavioral Health Department Quarterly Report
 - d. MSHN HCBS Report 04-2022

No additional action needed	By Who	N/A	By When	N/A
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REFERRALS TO STATE HOSPITALS (CLC/UMC)

What assessment tools are used by the CMHs, other than MCG Behavioral Health Criteria, to determine if a referral to a state hospital is needed. Do the assessment tools employed by the CMHs (including MCG) in the referral process include an analysis of substance misuse and/SUDs? No formal tools are currently used, however clinical considerations include: CAFAS/LOCUS, prior history and response to treatment, level of safety risk to self/community, availability of alternative resources. Some state hospital admissions are necessitated by denial of community-based hospitals to accept a person.

Todd to provide feedback to MDHHS	By Who	Todd Lewicki	By When	May 15, 2022
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