



Region 5 - Regional Medical Directors Meeting

Friday, May 17, 2024, 1:00pm-3:00pm

Meeting Materials: [05-17-2024 Regional Medical Director's Meeting | Powered by Box](#)

Zoom Link: <https://us02web.zoom.us/j/82291897541?pwd=SnN3ZGs1RXpyRkg1Ynl3Mms0Q3hKQT09>

FY 2024 Meeting Calendar

November 17, 2023

May 17, 2024

January 19, 2024

July 19, 2024

March 15, 2024

September 20, 2024

Attendees:

MSHN: Zakia Alavi (out), **Skye Pletcher, Todd Lewicki**

Bay: **Dr. Roderick Smith**

CEI: **Dr. Stanley**

Central: **Dr. Janssen**

Gratiot: **Dr. Rangwani**

Huron: **Dr. Edler**

Lifeways: **Dr. Drumm**

Montcalm: **Dr. Brian Smith, Melissa MacLaren**

Newaygo: **Dr. Baker**

Saginaw: **Dr. Ibrahim, Jen Kreiner**

Shiawassee: **Dr. Hashimoto**

Right Door: **Dr. Sanchez**

Tuscola: **Dr. Movva, Tina Gomez**

Guests:

KEY DISCUSSION TOPICS

1. Welcome & Roll Call/New Member
2. Review and Approve March minutes, Additions to Agenda
3. Draft CCBHC Handbook Version 1.9
4. FY24Q2 Balanced Scorecard
5. FY24Q1-Q2 Integrated Health Quarterly Report
6. Crisis Residential Update
7. Draft Update: BTP and HCBS IPOS Update and MDHHS/CMS Visit Update
8. Policy: discharging patients that have repeatedly threatened staff

Distribution list updates to be requested.

3- Draft CCBHC Handbook Version 1.9

The state has proposed additional language. Wanted to gather feedback to include to MDHHS. Looked at Section 8. and staffing requirements and qualifications. The RMD questioned if the CCBHC or if the DCO has to register. If the CCBHC does not directly provide, then they can create a relationship with a provider who is registered. Will registration on the SAMHSA directory increase inquiries into referrals that are incorrect? The SAMHSA site also appears to be organized by location but should it be the whole agency? The wording is confusing.

Prescribing and Medication Management section (8.C.5.) MAPS-when should it be consulted? It is not unreasonable if it is an intake, but maybe not before every appointment for a known patient.

Primary care screening (8.D.7.). They are asking the doctor to screen everyone who belongs to the agency, it appears. The RMD noted that this does not appear feasible. It may be that it just has to be “addressed.” What constitutes “conform to screening?”

Emergency crisis services (crisis stabilization/urgent crisis). Urgent care has certain staffing requirements. Prescriber may be available virtually but the concern is that with psych meds, there needs to be follow up.

Skye will ask for more clarification and/or specificity with MDHHS CCBHC team.	By Who	Skye	By	5/17/24
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4-FY24Q2 Balanced Scorecard

One of the ongoing barriers with the LDL-C testing for individuals with Schizophrenia and cardiovascular disease (SAA) is that dual-eligible individuals are not represented since most of the testing is paid for by Medicare. Additionally, CMHs can perform the screening in-office but do not have a way to submit a claim/encounter so the activity is not captured in the metric as it is based on claims data. The SAA metric does have clinical utility but it’s imperative that data validation challenges are addressed in order to move forward with setting performance benchmarks.

No additional action required.	By Who	N/A	By When	N/A
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5- FY24Q1-Q2 Integrated Health Quarterly Report

Included as informational. Current enrollments in integrated health initiatives were covered. Covered CCBHC, BHH, and OHH as well as expansion of new OHH providers in the region.

Informational only – no additional action required.	By Who	N/A	By When	N/A
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6- Crisis Residential Update

Hoping to have an open house in a couple weeks. Licensing is being worked through. Finishing training elements. Crisis Residential is one of the few programs that require special program approval by MDHHS prior to participating in Medicaid/HMP services. MSHN worked with Healthy Transitions to prepare the certification packet for submission to MDHHS. All CMHs have agreed to accept the recipient rights review/verification without each performing their own

	separately.				
	Informational only – open house information will be distributed when it is finalized.	By Who	N/A	By When	N/A
7- Draft Update: BTP and HCBS IPOS Update and MDHHS/CMS Visit Update	Todd reviewed IPOS documentation requirements for HCBS services and the significant areas of overlap with BTP requirements. MDHHS has stated that BTPs are not a substitute for documenting the requirements in the IPOS. MSHN and its regional partners have engaged in significant advocacy with MDHHS to streamline documentation requirements rather than requiring duplicate/overlapping documentation in both BTP and IPOS. MDHHS has not been receptive to advocacy efforts, citing that MDHHS current focus is the upcoming federal compliance audit in July. Federal auditors plan to visit a selection of specialized residential homes during the audit.				
	Informational only – MSHN will continue to share information and guidance from MDHHS as new guidance is released.	By Who	N/A	By When	N/A
8-Policy Discussion: Discharge of Patients who Threaten Staff	Question raised by Dr. Alavi – looking for feedback from other CMHs of any policy/procedural guidance regarding how to respond to patients who have threatening/aggressive behavior toward staff. Discussed various mitigation strategies as appropriate to circumstances of individual cases such as seeing patient virtually only, changing to a different staff/provider within agency, developing agreement with neighboring CMH to provide services to the individual, security screenings at CMH entrance including metal detection wands, etc. CEI has an involuntary discharge procedure with some exceptions such as a person cannot be denied crisis services. CEI also uses some telepsychiatry providers that are not physically located in Michigan and the person served comes to the crisis services center to participate in the telehealth appointment (not full access to main CMH campus and buildings).				
	Informational only – no additional action needed. Dr. Stanley will share CEI's procedure as a courtesy.	By Who	N/A	By When	N/A
9-					
		By Who		By When	
10-					
		By Who		By When	