Provider Network Management Committee Minutes

Date: 3/28/2018

Location: ⊠CEI-CMHA, G11-A □Conference Call

Time: 10:00 AM until 12:00 PM Call-In: 888-585-9008/320.707.733

Attendance (phone*):	⊠T. Lawrence (CMHCM)*	⋈ A. Ferzo (Huron)*
S. Clevenger (Lifeways)*	⊠J. Keilitz (Saginaw)*	☑ J. Hagedon (Tuscola)*
☐M. Leonard (Lifeways)*	⊠K. Jaskulka (MSHN) *	☐M. Rozek (BABH)*
☑ D. Jenkins (Shiawassee)	⊠C. Watters (MSHN)	☑ T. Curtis (Montcalm)
⊠N. Derusha (The Right Door)	⊠C. Mills (Newaygo)*	☑ T. Humphreys (Huron)*
⊠S. Richards (The Right Door)*	⊠B. Pazdan (CEI)	☐ A. Dillon (MSHN)*
⊠S. Stroh (Gratiot)*	⊠T. Lewicki (MSHN)*	☐ M. Davis (MSHN)*

Purpose and Powers

Purpose: provide counsel and input to with respect to regional policy development and strategic direction.

- Develop policies and standards related to provider network management
- **Identify** barrier and gaps related to network adequacy
- Recommend improvement strategies
- Monitor follow-through
- Coordinate with other committees

Information

All available information should have been shared and reviewed prior to the meeting. Prior to the meeting, attendees review materials and prepare questions/feedback. Information includes previous minutes, data reports/dashboards, announcements, etc.

- 1. Welcome and Roll Call
- 2. Review and Approve 2/28/2018 Agenda approved with addition of EVV
- 3. Review PNMC Minutes 1/24/2018 approved
- 4. PNMC Action Plan Review Progress to Plan
 - a) Home and Community Based Services (T. Lewicki)

Decision:

Background:

Question:

- Question: LARA license rules and receipt rights conflict as it relates to house rules. Who is correct? Answer: HCBS rules override LARA rules.
- Question: How do you address visitors at odd hours? Answer: Reflect this in the consumers plan if it relates to health and safety issue.
- Question: How do you ensure compliance with choice of staff? **Answer:** If choices is offered and documented, this should be in compliance.
- Question: We are struggling with non-verbal consumers who may not understand the questions. Should the guardian complete the survey? **Answer:** This needs to be thought through, but document in the PCP. The guardian cannot limit the persons freedom.

- Question: Does NGRI Committee rules trump HCBS rules? Answer: If it is a health and safety issue, it should be documented in the plan, including the behavior treatment plan, if one is being used that addresses safety.
- Question: How do you verify visitors are not predators or sex offenders if visitors are allowed at any time for any length of stay? **Answer**: Protections should be put into place so consumers are not victimized. This could be handled at the home policy/process level.
- Question: If you can't have house rules how do you address the issue of potential sex offenders? Answer: there has not a lot of discussion on this subject so Todd will take it back to the next lead meeting, but we should let common sense prevail.

Discussion: All new contracts will require the provisional approval application and process, regardless if the provider is contracted with another CMHSP in the region. MSHN previously communicated that this was only a requirement for new providers to MSHNs region; however, the state recently changed the requirement. MSHN provided draft policy and procedure relative to the provisional approval process. These are in the formal approval process but can be used as a guide until notice of final approval or changes. This process is intended to ensure providers are not on heightened scrutiny once they receive the survey. MSHN is also working to develop the most efficient process for synchronizing HCBS reviews with MSHN DMC reviews — complex in how we involved CMHSPs in CAP process. Where the provider indicates in their CAP that they are modifying physical plant (eyes on review). Policy/Procedure (desk review). Waiver team will conduct review of selected providers.

Outcome:

b) Network Adequacy Assessment (S. Zin, T. Teed)

Decision:

Background: CEI now contracted to complete the MSHN network adequacy assessment.

Question:

Discussion: Reviewed the tables and figures to identify for contractors who is responsible for the information updates, whether it be PNMC, other committees, or MSHN staff. Offered committee members the opportunity for feedback on the process; committee indicated the current/previous process worked well.

Outcome:

c) Reciprocity – Intra-Regional Systems Update (C. Watters)

Decision:

Background:

Question:

Discussion: Melissa Davis (MSHN) is finalizing all the schedules and Carolyn will complete a master schedule of all auditing dates. Audit of Memorial conducted by Shiawassee/MSHN on behalf of the region. Report with be shared with region within 30 days. Audit scheduled with Hillsdale Hospital on 4/11/18 to be conducted by Lifeways/MSHN.

A vendor has been selected for the Files Transferal Protocol Site (FTPS) that can be used for multiple services like: file sharing of report, corrective action plans, and related communications **Outcome:**

d) Provider Directory Update (C. Watters)

Decision: For CMHSPs who use PCEs provider management module, you may contact PCE and request a data export be developed to mirror the MSHN directory template to streamline the process . . . export file from CMHSP PCE system, upload to MSHN REMI system (3 simple steps). Group also reviewed draft policy/procedure – no changes recommended from committee. This will go through the formal approval process.

Background: Collecting providers directories from the group. MSHN is testing the files in REMI and will work with CMHSPs to get a validated file. Errors do occur for very simple things such as too many characteristics for an entry or misspelled counites. Other validation issued identified that need to be addressed with PCE.

Question: Discussion: Outcome:

5. Other Discussion & Planning

a) MSHN Strategic Planning Process (C. Watters)

Decision:

Background: MSHN strategic Plan is still in draft form. Seeking Council/Committee input. A forth aim was added to include *Better Provider System*. Please submit any suggestions or your feedback by email to Carolyn by next Wednesday (4.4.18) and it will be shared with MSHN Leadership.

Question:
Discussion:
Outcome:

b) Electronic Visit Verification (EVV) (T. Lawrence):

Background: 21st Century Cures Act requires that states implement an Electronic Visit Verification (EVV) system by January 2019 for CLS and PC by January 2023 for home help. The requirement is that this system verifies, at the time of service, for Medicaid funded care in the enrollees home or in community settings, the type of service provided, the verification, by the consumer, of the service being delivered, the location (via GPS verification), the time and date, the patient/consumer's name, and the provider's name - for CLS and PC in specialized/licensed residential home and respite care. There will be a state-sponsored/operated EVV system. This has been discussed at the Directors forum and at this point, awaiting more information from the State.

- c) Informational: The following were provided as informational for review by committee members. Not action necessary.
 - a. House Bill 5487 Uniform Credentialing Program NOTE: Since PNMC met, we have been informed that this HB does not apply to the behavioral health system.
 - b. House Bill 5439 Electronic Inpatient Psychiatric Bed Registry
 - c. House Bill 5450, 5451, 5451 Amend respective acts to revise the types of crimes for which an individual is prohibited from employment, an independent contract, or clinical privileges . . .

Meeting adjourned at 11:33am

Next Meeting: 4/25/2018 $\hfill\Box$ F2F $\hfill\boxtimes$ Conference Call