Provider Network Management Committee *Minutes*

Date: 2/22/2017		
Location: ☐ Gratiot CMH 608 Wright Ave, Alma, MI ⊠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)*
⊠T. McMurtry (Lifeways)*	⊠G. Reed (Saginaw)*	☑ D. Babich (Tuscola)*
\square K. Hartley (Shiawassee)	⊠K. Jaskulka (MSHN)*	☑ J. Pinter (NAA Contractor)
⊠K. Posen (The Right Door)	⊠C. Watters (MSHN)	⊠ M. Rozek (BABH)*
⊠S. Richards (The Right Door)*	⊠C. Mills (Newaygo)*	☐ T. Curtis (Montcalm)
☐S. Stroh (Gratiot)	☐ N. Derusha (CEI)	
	⊠T. Humphreys (Huron)	

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 (S. Vandermay)
- 2. Review and Approve 2/22/2017 Agenda (S. Vandermay)
- 3. Review PNMC Minutes 1/25/2017 (S. Vandermay)
- 4. PNMC Action Plan Review Progress to Plan
 - a. HCBS Transition Update (T. Lewicki)
 - b. Fiscal Intermediary Update & Proposal Review (K. Jaskulka)
- 5. Other Discussion & Planning
 - i. PNMC Scorecard Update (C. Watters)
 - ii. Medicaid Managed Care Rules Update (C. Watters)
 - iii. Regional Inpatient Operations Workgroup Update (C. Watters)

Decisions

Decisions that require use of resources (time, money) are written in the form of questions identifying the precise decision that the group is being requested to make. Each decision should be made by completing a formal <u>Decision-Making Checklist</u>. The assumption is that all attendees are empowered to make decisions within the group's scope.

- Item 1: Roll Call
 - o Update on committee membership changes
- Item 2: Review and Approve Agenda
 - o Approved
- Item 3: Review and Approve Minutes
 - o Edited attendance

• Item 4a: HCBS Transition Update

- Update: T. Lewicki provided an update on the Home and Community Based Services transition. Serves as the lead for MSHN. State transition plan has not been approved by feds yet. DHHS/LARA working on a joint guidance document. Questions on conflicting rules. No answer as to when this will be released.
- o Jan phase II of surveys were complete. MSHN had 90% completion rate. Notification letters are not ready yet. State has been working with Optum to get them into WSA. Letters will show 'in-compliance' and out of compliance with a detailed list of all areas they were out of compliance. Expect the letters to go out by the end of March.
- o b3 persons who are 21+ getting skill building, CLS, supported employment. MSHN will need to identify a date to run the list of Q1 of FY17. Due to state by April 3rd. K. Hammack has distributed education materials to waiver coordinators.
- O Questions: Are we confident that the letters will address standard compliance vs. compliance with survey completion? Yes, and letters will have links to the monitoring tools so providers can work on compliance.
- o State's view is that PIHPs are responsible for ensuring appropriate systems are established to ensure follow-through.
- o Will CMHSPs receive results prior to the provider? As soon as letters are ready, Todd will use PNMC to share results. Recommend utilizing PNMC and other committees as fit to ensure it is on the agenda and communication is occurring through the process.
- o Critical for CMHSPs to be in the loop as they will need to help the providers come into compliance and often the CMHSP may own the home.
- o Will WSA portal be used, even for b3? Yes.
- Specific questions or recommendations can be communicated to Todd Lewicki as he is the lead

• Item 4b: Fiscal Intermediary Workgroup

- O Update: workgroup met on Monday. Draft contract template was reviewed and sent out. Kyle will have a draft for PNMC to review. Workgroup has until Friday to provide feedback to Kyle. Asked committee for feedback on draft monitoring policy/procedure since presented in January. Requested additional time to review. Asked for committee feedback on FI proposal for Ops Council. Made changes and requested.
- Decision: Carolyn will send contract, tool, policy and procedure for review/feedback by Friday, March 3rd.

• Item 5a: PNMC Score Card Update

Update: No additional feedback from the committee after January presentation of the draft.
 Next step is to finalize the metrics and submit final version to Ops Council in March. Will begin quarterly reporting to Ops Council.

• Item 5b: Medicaid Managed Rules Update

- O Update: questions/clarification was submitted to the state wide workgroup of PIHP reps via the workgroup website. Expect feedback by next week.
- Item 5c: Regional Inpatient Operations Workgroup Update

- O Update: workgroup had a kick-off meeting last week. Discussed the charter and provided context around the charge of the group. Discussed the States Reciprocity Policy and how it relates to the charge of the group. Workgroup shared their vision recommended that the initial area of focus is developing a single set of psychiatric inpatient provider performance standards including pre-admission, admission, continuing stay, discharge and aftercare.
- Shared, as a model, draft monitoring tools that have been drafted by a PIHP workgroup for the purposes of identifying common standards for inpatient unit monitoring. The PIHP workgroup process may inform the regional monitoring protocol as part of the regional inpatient workgroup charge.
- Workgroup will meet monthly and report to the Operations Council. Carol Mills, Tracy Dore,
 Julianna Kozara, and Susan Richards serve as the Provider Network representatives.
 Committee minutes will be shared as informational.