Provider Network Management Committee Minutes

Date: 6/28/2017		
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)*
⊠S. Vandermay (Lifeways)*	⊠G. Reed (Saginaw)*	🖂 D. Babich (Tuscola)*
🖾 D. Jenkins (Shiawassee)	🖾 K. Jaskulka (MSHN)*	I. Pinter (NAA Contractor)
□K. Posen (The Right Door)	🖾 C. Watters (MSHN)	🗆 M. Rozek (BABH)*
⊠S. Richards (The Right	⊠C. Mills (Newaygo)*	🗆 T. Curtis (Montcalm)
Door)*	🖾 B. Pazdan (CEI)	
\Box S. Stroh (Gratiot)	⊠T. Humphreys (Huron)	
Purpose and Powers		
	•	policies and standards related to network management

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

network adequacyRecommend improvement strategies

Identify barrier and gaps related to

- 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 new member and Roll Call (S. Vandermay)
- 2. Review and Approve 6/28/2017 Agenda (S. Vandermay)
- 3. Review PNMC Minutes 4/26/2017 (S. Vandermay)
- 4. PNMC Action Plan Review Progress to Plan
 - a. Fiscal Intermediary (C. Watters)
 - b. Network Adequacy Assessment
- 5. Other Discussion & Planning
 - i. Children's Licensing (C. Watters)
 - ii. Inpatient Operations Workgroup Update (C. Watters)
 - iii. Psychiatric Bed Registry (C. Watters)
 - iv. MSHN Provider Directory (C. Watters)
 - v. Reciprocity Update (C. Watters)

- Item 1: Welcome new member & Roll Call
- Item 2: Review and Approve Agenda
 - o Approved
- Item 3: Review PNMC Minutes 4/26/2017
 - o Approved
- Item 4 PNMC Action Plan
 - a. Fiscal Intermediary documentation was reviewed and feedback received but changes were recommended and modifications on contracts require Leslie Thomas, Amanda Horgan (MSHN) to submit contract for review to the OPS council. The discussion was that the contracts stay with CMH's. Leslie's Finance Committee had not looked at it yet. Action Item: Carolyn will obtain clarification on the continued discussion at Ops Council. Rate has not been made as to if CMH's will set standard rate – discussion still on going. CEI is using CLN. Two options were presented to Ops Council, based on PNMC feedback: centralization model or delegated model. UPDATE since PNMC Meeting: Discussion in Ops Council included MSHN recommending a hybrid approach whereby 1) MSHN negotiates and executes the standard contract with Fiscal Intermediary organizations where two or more CMHSPs have a service relationship. This contract would cover not only those CMHSPs that have an existing service relationship, but any/all CMHSPs in the MSHN region. The contract would include a single rate and scope of work for services provided by the Fiscal Intermediary supplier. 2) Individual CMHSPs negotiate and execute the standard contract with Fiscal Intermediary service suppliers where that single CMHSP is the sole purchaser. This contract would cover only the CMHSP that holds the contract and would not be available to any/all CMHSPs in the MSHN region.
 - The hybrid proposal will be discussed at the Ops Council in July.
 - b. Network Adequacy Assessment skipped J. Printer was not present

Item 5: Other Discussion & Planning:

- a. Children's Licensing the contract language regarding discharging a consumer was asked by Carolyn as to what was being used by everyone – 60 day termination clause – transition training? Steve will share the language that his agency uses. Shiawassee had no language. Carolyn stated that if there is language that you are using to please share with the group. Action Item: Everyone is to share their discharge language with the group.
- **b.** Regional Inpatient Operations Workgroup Snapshot provided statement of work is being reviewed regarding language adoption for contract for July's meeting. June's meeting Mid-State policy submitted to OPS Council for review
- c. Psychiatric Bed Registry Update on go-live (July 10th) for statewide inpatient denial data collection. Development of a Psychiatric Bed Registry is moving forward at the state level. The next step is to put together a statewide workgroup to design a PBR, with other sub-workgroups focusing on other issues related to inpatient access. There were no questions.
- d. MSHN Provider Directory statewide work group will develop new language as to what needs to be in there. The FY18 contract will go into effective on Oct 1st. There will be more specific information at the next meeting on how updates will be met monthly. Mid-

State is working with considering options to manage the monthly update process in PCE to make the process automated and efficient as possible. Action Item: Provide link for managed care rule regarding provider directory requirements: <u>https://sites.google.com/view/miphipfinalrule/summary</u>

e. Statewide Reciprocity Update: Carolyn provided a summary of how a system could be implemented on reciprocity. The focus would be on a core set of training of support staff.
-proposal is that PHIP's develop a system that tracks providers that are meeting mandatory training
-honoring the training of reciprocity – meaning there could be forgoing of retaining of a

provider if they leave one provider but hired by another provider

Next steps: 1. Joe Sedlock, CEO of Mid-State to brief OPS Council

2. PNMC to identify 4-5 training coordinators to volunteer develop a process (time limited). Carolyn asked for volunteers and the following responded: Dawn Heje will be asked by Ginny Reed and Tammy Curtis volunteered from Macomb.

Meeting was adjourned at 10:45am