

Meeting: Quality Improvement (QI) Council

Meeting Date: February 23, 2017

Attendees:

Attended in Person: CMHCM, CEI, Gratiot, Newaygo and Shiawassee

Attended by Phone: BABH, CEI, Huron, Montcalm, Right Door, Saginaw and Tuscola

MSHN Staff: Joe Wager (In Person), Todd Lewicki (In Person), Kim Zimmerman (In Person), Jill W. (Phone)

Not Present: LifeWays

KEY DISCUSSION TOPICS

- Review & approve minutes
- Review & approval of agenda for today's meeting
- Review follow up action items/action plan
- Performance Measures Update
- Retained Contract Functions Update
- Performance Improvement Project (s)
- QIC Scorecard
- Follow up After Hospitalization Review
- Managed Care Rules Tracking Matrix
- Informational Items
- Updates: MSHN, Council & Committee Updates

✓ **KEY DECISIONS**

- Review & Approve Minutes- The minutes from 01/26/17 were approved as submitted
- Review & approval of agenda for today's meeting- The agenda was approved w/o additions
- Review follow up action items/action plan- Reviewed the action items from last meeting
 - ✓ PI FY17 Q1 data: Due by 03/01/17
 - ✓ MHSIP data: Due by 03/20/17
 - ✓ YSS data: Due by 03/20/17
- Performance Measures Update
 - ✓ FY17 Q1 Performance Indicator Summary Report: Due in April
 - Discussion around authorization prior to providing services for COFR cases
 - This will be brought back to March meeting
 - ✓ FY16Q4 Behavior Treatment Review Summary Report: Due in March
 - ✓ Satisfaction Surveys: MHSIP and YSS
 - The surveys need to be completed during a two-week period between January 30th and February 26th
 - The data is due to MSHN by March 20th
- Retained Contract Functions Update:
 - ✓ CI Report (FY17 Q1) reviewed by CEI
 - Discussion regarding definition and reporting of emergency medical treatment
- Performance Improvement Projects
 - ✓ RAS/RSA
 - The collection period for these surveys is January 1, 2017 through March 31, 2017
 - Data is due to MSHN by April 30th
 - ✓ HEDIS Measure
 - FY16 Q4 data was reviewed
 - Met percentage increase that was establish as the regional goal
- Policy and Procedure Review
 - ✓ All QI policies and procedures will be reviewed in March

	<ul style="list-style-type: none"> • QIC Scorecard: <ul style="list-style-type: none"> ✓ Reviewed the scorecard again and the feedback provided by Ops Council ✓ We will start looking at the available scorecard data in March • Follow Up after Hospitalization Review <ul style="list-style-type: none"> ✓ Reviewed draft Project Study Description and POC template ✓ Data will be reviewed beginning in March • Informational Items: Reviewed memo from MDDHS regarding: Waiver of Portion of Medicaid Provider Manual Section 17.3.7. Skill Building Assistance • Managed Care Rules Tracking Matrix: Reviewed sections pertaining to CSC and QIC
✓ ACTION/INPUT REQUIRED	<p>Action Plan:</p> <ul style="list-style-type: none"> ○ The action plan will continue to be updated on an ongoing basis <p>FY17 Q1 Performance Indicator Summary Report:</p> <ul style="list-style-type: none"> ○ Summary Report to be reviewed in April ○ Further discussion on COFR issue in March ○ Kim will also send this issue to the Provider Network Management workgroup as an FYI <p>Behavior Treatment Summary Report:</p> <ul style="list-style-type: none"> ○ Summary Report to be reviewed in March <p>Satisfaction Surveys: MHSIP and YSS</p> <ul style="list-style-type: none"> ○ The surveys need to be completed during a two-week period between January 30th and February 26th ○ The data is due to MSHN by March 20th <p>Critical Incident Summary Report</p> <ul style="list-style-type: none"> ○ Each CMHSP will the total number of people residing in specialized residential settings to Emily at CEI prior to March 10th ○ Joe will send out instructions on how to pull this data from BH-TEDS <p>RAS/RSA:</p> <ul style="list-style-type: none"> ○ The collection period for these surveys is January 1, 2017 through March 31, 2017 ○ Data is due to MSHN by April 30th <p>HEDIS Measure:</p> <ul style="list-style-type: none"> ○ Members will discuss locally any continued barriers and interventions needed and be prepared to discuss at next meeting <p>Policy and Procedure Review:</p> <ul style="list-style-type: none"> ○ Members will review locally and send any suggested revisions to Kim prior to the next meeting and come prepared to discuss at the March meeting <p>QIC Scorecard</p> <ul style="list-style-type: none"> ○ Data will be reviewed beginning in March <p>Follow up after Hospitalization Review</p> <ul style="list-style-type: none"> ○ Kim will finalize the Project Study Description document and bring back to March meeting ○ Data will be reviewed in March
✓ KEY DATA POINTS/DATES	<ul style="list-style-type: none"> • Next Meeting: March 23, 2017