

Meeting Date: 2/24/2022

**\*Zoom Attendance**

- MSHN – Sandy Gettel\*
- Bay Arenac –Sarah Holsinger\*
- CEI – Shaina Mckinnon\*
- Central –Kara Lafferty\*
- Gratiot – Taylor Hirschman\*
- Huron – Levi Zagorski\*
- Lifeways –PJ Hoffman\*
- Montcalm – Sally Culey\*
- Newaygo – Andrea Fletcher\*
- Saginaw-Holli McGeshick\*
- Shiawassee –Becky Caperton\*
- Tuscola – Jackie Shillinger\*
- The Right Door- Susan Richards\*

Guests

- CEI – Tonya Seely\*
- The Right Door –Jill Carter\*
- MSHN Joe Wager
- MSHN Tammy Foster
- GIHN Pam Fachting
- MCN Joe Cappon
- Lifeways –Joshua Williams
- SCCMH-A Wilcox
- TBHS-
- CEI – Bradley Allen\*

**KEY DISCUSSION TOPICS**

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| <ol style="list-style-type: none"> <li>1) Welcome and introductions-</li> <li>2) Review &amp; Approvals             <ol style="list-style-type: none"> <li>a. Meeting Minutes/Agenda</li> <li>b. Review follow up action items</li> </ol> </li> <li>3) Performance Improvement Projects-March</li> <li>4) QAPIP-Operations Council February Board of Directors March</li> <li>5) Performance Measure Updates             <ol style="list-style-type: none"> <li>a. Critical Incidents Performance</li> <li>b. Summary-CRM Discussion</li> </ol> </li> </ol> | <ol style="list-style-type: none"> <li>6) Project Development             <ol style="list-style-type: none"> <li>a. ICDP Process for “addressed” etc</li> <li>b. Behavior Treatment Data Collection Review-Questions</li> <li>c. HSW Slot Utilization</li> <li>d. Veteran Navigator Referral</li> <li>e. <a href="#">MMBPIS- FAQ-</a></li> <li>f. PCP process map with required timelines (barriers/solutions)</li> </ol> </li> <li>7) MDHHS/MSHN Updates             <ol style="list-style-type: none"> <li>a. Announcements</li> <li>b. MDHHS Waiver Review</li> <li>c. MDHHS QIC Updates -SIS</li> <li>d. MSHN Website - Corona Virus MSHN</li> </ol> </li> </ol> |
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**KEY DECISIONS**

- 2) Review & Approvals
  - a. Meeting minutes for 1/20/2022 approved with no edits. No additions to the agenda.
  - b. Review follow up action items/QIC Action Plan.
- 3) Performance Improvement Projects (PIP)-(Informational) March QIC development, PIP Webinar with HSAG 3/22/2022.
- 4) QAPIP - (Informational) Final Documents presented at Operations Council February. The QAPIP FY22 Plan and FY21 Report will be received for approval by Board March 1st, The Board Approved QAPIP FY22 Plan and FY21 Report will be submitted to MDHHS March 2.
- 5) Project Development
  - a. Consistent regional process for the use of ICDP Data. Areas of consideration include
    - The inclusion of the Dual Eligible (Medicaid/Medicare) in the Priority Measure Reports. MDHHS excludes the Dual Eligible in the Michigan HEDIS Aggregate Report. ICDP does not include Medicare claims. CMHSP Participants do not have access to Medicare claims. The recommendation is to remove the Dual Eligible from current reports to allow for comparative data in Michigan. The Dual Eligibles can continue to be included for coordination activity through care alerts when applicable.
    - The use of “addressed” within the care alerts. Currently “addressed” is used to exclude a record from the performance rate when a claim is not present (has not been submitted) in ICDP at the time of the review, but documentation has been found in the record. This is primarily used for Dual Eligible when Medicare has been billed for the service. Medicare claims are not available through the CC360 extract which ICDP processes.  
Should “addressed” be used for Medicaid records, if a claim has not been received, but documentation has been found? Implications include a variance in the performance rate compared to MDHHS’s MSHN Data. However, follows the intent of care alerts, which include coordination of care with primary care physicians and development of process to ensure the activity is completed relevant to the measure. No recommendations were made at this time. Additional follow up to include pulling the number of Medicaid records that are “addressed”.
  - b. Behavior Treatment Data Collection Review-The BTPR Workgroup recommendations were discussed and accepted. Clarified the scope to include all who had an expedited and full plan review, individuals who had a physical intervention and/or a 911 call made by a caregiver during the reporting period, and all individuals prescribed medications that meet the definition of an intrusive technique. Caregiver is defined as any

	<p>paid support. The question of physical intervention by episode or intervention was undecided. Additional information will be sought from the State and other PIHPs.</p> <ol style="list-style-type: none"> <li>c. HSW Slot Utilization-Initial discussion of the barriers for the use of the HSW slots. Current barriers include no additional benefit to the consumer and/or guardian as a result of the same services available without the waiver; the financial gains are received by the organization not the consumer, the paperwork and oversight significantly increase the resources needed for the waiver recipients. More discussion will occur internally and at relevant regional workgroup and/or committee/council. Solutions are provide brochure of the benefits of the program, discuss service array with MDHHS.</li> <li>d. Veteran Navigator Referral – Current MSHN VN’s include CEI, Saginaw (Saginaw, Bay, Midland), and MSHN. Referral review with updates made to language related to military experience past or present. Tammy to develop data elements for referral and how to collect the declines. Additional questions related to the referral process (form versus email; documentation of declines; warm hand offs) will be discussed next month at QIC.</li> <li>e. MMBPIS- FAQ-Email communication will occur related to new questions.</li> <li>f. PCP process map with required timelines (barriers/solutions) – Draft currently being developed by CMHCM, with QIC providing feedback. Volunteers will be accepted to assist with process.</li> </ol> <p>6) Performance Measurement Updates</p> <ol style="list-style-type: none"> <li>a. Critical Incidents Performance Summary-CRM Update on expected changes to occur effective FY22. No specifications received as of yet.</li> <li>b. BTPRC Summary (In folder for review)</li> </ol> <p>7) MDHHS/MSHN Updates</p> <ol style="list-style-type: none"> <li>a. Announcements-Joe Wager has accepted the Information Technology Project Manager position effective February 21. Open positions are on the MSHN Website.</li> <li>b. MDHHS Follow Up Review Waiver Review – Document guidelines will be completed based on the FAQ’s from last year, MDHHS Powerpoint.</li> <li>c. PCP Trainings/Webinars.</li> <li>d. MDHHS QIC Updates</li> <li>e. MSHN Website - Corona Virus MSHN</li> </ol>
<b>ACTION STEPS</b>	<ul style="list-style-type: none"> <li>• MSHN-VN to provide a referral form and data elements required for the quarterly report of declines.</li> <li>• MSHN-Provide Priority Measures Report with Dual Medicaid/Medicare and without the Dual Medicaid/Medicare</li> <li>• MDHN-Pull report with the number of those that are “addressed” with Dual Medicaid/Medicare, compared to those that are addressed and Medicaid Only.</li> <li>• MSHN-QM to send out email related to the new MMBPIS FAQs</li> </ul>
<b>KEY DATA INTS/DATES</b>	<ul style="list-style-type: none"> <li>• Data Analytics March 8, 2022</li> <li>• QIC March 24, 2022</li> </ul>