



**Council, Committee or Workgroup Meeting Snapshot**  
**Meeting: Information Technology Council**

Date: January 21, 2025

AmyLou Douglas, SCCMHA  
Brian McNeil, GIHN  
Brandon Dotson, CEI  
Chad Brown, SCCMHA  
Holli McGeshick, SCCMHA  
Jay Hollinger, NCMH  
Jane Cole, CMCMH  
Kevin Faught, CMHCM  
Laura Rickwalt, TBHS  
Martin Slomnis, CMCMH  
Shannon Froese, CMHCM  
Nathan Derusha, TRD  
Rebecca Marshall, SHW  
Shawn Wise, MCN  
Terry Reihl, MCN  
Theresa Adler, BABH  
Steven Grulke, MSHN  
Joseph Wager, MSHN  
Ron Meyer, MSHN  
Cathy Todd, MSHN  
Fred Mercado, Lifeways  
John Schwartzkopf, GIHN  
Christopher Hermans, SCCMHA  
Jennifer Tucker, SHW

**KEY DISCUSSION TOPICS**

Consent Items

1. Roll Call, December 17 snapshot – All

Informational Items

2. MDHHS communications – Steve
  - a. November Medicaid Closure file (Dec 17)
  - b. BH TEDS Error Descriptions (Dec 26)
  - c. HRA – Invalid NPIs (Jan 5)
  - d. December Medicaid Closure file (Jan 6)
  - e. FY25 Encounter Recon file (Jan 7)
  - f. FY26 Encounter Recon File (Jan 7)
  - g. FY26 BH TEDS processing errors (Jan 9)
  - h. EQI consultation draft document (Jan 15)
  - i. MiHIN Longitudinal record viewer upgrade (Jan 16)
3. BH-TEDS and Encounter submissions – Shyam/Ron/Cathy
4. Provider directory requirement to include a “TeleHealth” Yes/No field.
5. Authorization metrics on MSHN website – CMS Auth & InterOp final rule.
6. BH TEDS for CCBHC (SUD) – how are people handling this?
7. Are people using any documentation assistance (Eleos/BluePrint) – Brandon.
8. Are people using AI for administrative activities – Fred
9. Data Loss Prevention (Microsoft exchange rules to purview) – Fred
10. Poll – Who is participating in the Decipher program with Johns Hopkins and U of M?

11. Updated 5515 form – PCE is requesting an ITR to implement these changes in your system.
12. MDHHS CLD workgroup attendees. Hyso email from today.
13. EVV
14. Status of implementing the Autism Module?
15. CCBHC BH TEDS workgroup – DUA needed
16. Lifeways piloting WSA bi-directional transfer – Update?
17. CIO forum update – no meeting
18. Face-2-face ITC meeting
19. Other – All
  - ITC meeting on February 18 –Zoom call only.
  - April 15 meeting will be face-to-face at Gratiot Integrated Health Network.
20. CCBHC IT operational concerns/questions (as time allows)
21. BHH IT subgroup (as time allows)
  - Central, Montcalm, Newaygo, Saginaw, Shiawassee and GIHN

## ✓ KEY DECISIONS

- Communications from Carol Hyso regarding BH TEDs have been sent out.
- EQI sent out
- MiHIN Longitudinal record viewer – improvements have been made based on feedback if you choose to share with staff
- Carol Hyso has set an extension **2/28** deadline for BH-TEDS completion.
- Encounter submissions have run into few complications, and are generally being submitted and received without error
- Telehealth (Yes/No) field project plan will be initiated for provider directory based on state requirement – more information on collecting new data field

- Authorization on MSHN website – length of time to have authorization approved/denied and % denied – more information to come on how information will be put onto website
- BH TEDs for CCBHC – in past they were entered directly into REMI. This may SUD DCO or do SUD services. Saginaw will be entering into their EMR and will be sent through batch process into REMI
- AI in system – MCN is piloting MS Blueprint (Eleos was too costly) and receiving positive feedback from clinicians. Blueprint pricing is based on usage (example \$1 per assessment would be around \$2K/mo). AI policy has been written in draft based on MSHN that will be updated before taken to board. Blueprint link shared in chat <https://www.blueprint.ai/pricing>. They are copy/paste at this time, but they do have a browser extension they report is easier. CMHCM will be participating in a pilot upcoming but being very mindful of cost (\$80/90+mo). Previous pilot for CMHCM struggled with system recognizing more than 2 people in the room – MCN did identify Blueprint suggested if more than 3 people to announce name at beginning. Saginaw has determined not to pursue AI for clinical currently while they work on policy/procedure
- AI for administrative activity – Saginaw is working on AI governance program for admin purposes that are outside any clinical documentation (drafting meeting minutes with no PHI). Shiawassee has paid version of copilot (green shield displayed on open upper right-hand side) and allowing clinicians to use without PHI and are putting together governance program and has had presentations created. CMHCM has identified a group of individuals for governance using their ticketing system to vet any requests and has used AI for some presentation drafts. BAA is automatic with Microsoft 0365
- Data loss prevention (Fred) – mix use of AI – set basic DLP policy and looking for anyone willing to share examples and wondering if others moved everyone to E5 compliance licensing. MCN has DLP on exchange emails for 2-3 years and requires a lot of fine-tuning using Microsoft baselines (diagnosis codes, lab tests, prescription) automatically encrypts messages and sometimes there can be false

	<p>positives and encrypts something it shouldn't. Purview E5 license discussion. Proofpoint</p> <ul style="list-style-type: none"> <li>• Decipher program (John Hopkins and U of M) – Shiawassee and Saginaw are participating. BAA with John Hopkins. De-identifying data vs 3<sup>rd</sup> party to identify. They are asking for several identifying fields.</li> <li>• MDHHS 5515 has been updated – PCE has not gotten to updating all systems so encouraging everyone to make the request through their project managers. Some concerns with the forms (completing 2,3,4) could result in confusion. Important all waivers and health homes are using new form for enrollments. Saginaw has ITR in and were told it would be a framework change, but ITR is needed</li> <li>• Carol Hyso starting BH TEDs CLD workgroup attendees – Steve is confirming if she is wanting 2 from each CMH/PIHP.</li> <li>• EVV – anyone seeing events from Alternative Services? MCN had reached out to them previously when they were contracted with them</li> <li>• Autism Module – will continue to move toward so data can be automated that has been available in WSA in past</li> <li>• CCBHC BH TEDs workgroup – DUA need will be discussed at next meeting</li> <li>• Lifeways WSA bi-directional transfer pilot – will have update at next meeting.</li> <li>• Face to Face IT Council Meeting – 4/15/26 Meeting will be at Gratiot</li> </ul> <p>CCBHC:</p> <ul style="list-style-type: none"> <li>• BH TEDs errors identified and Brandon is looking into this</li> </ul> <p>BHH:</p> <ul style="list-style-type: none"> <li>• Dashboard reports – no outstanding barriers on accessing data analytics</li> </ul>
<p>✓ ACTION/INPUT REQUIRED</p>	<ul style="list-style-type: none"> <li>• Steve will get clarification on the membership for CLD workgroup</li> </ul>

	<ul style="list-style-type: none"><li>• Steve will take specific requests regarding the Autism Module back to Todd Lewicki.</li><li>• Lifeways will report on bi-directional transfer pilot in February</li></ul>
✓ <b>KEY DATA POINTS/DATES</b>	<ul style="list-style-type: none"><li>• Next Meeting is February 15th, Remote</li></ul>