Council, Committee or Workgroup Meeting Snapshot		
Meeting: Regional Compliance Committee		
Meeting Date: April 19, 2024	KEY DISCUSSION TOPICS	
Attendees: BABH, CEI, CMHCM, GIHN, Huron, LifeWays, MCN, Newaygo, Saginaw, Shiawassee and TBHS MSHN Staff: Kim Z., Amy Dillon and Bria Perkins	 Agenda Review Follow Up from Previous Meeting DMC Site Review Updates MEV Site Reviews Draft OIG Quarterly Report SAMSHA SUD Confidentiality of Patient Records Update Data Analytic Platform Review Open Discussion 	
Not Present: Right Door		
*This meeting was held by zoom only KEY DECISIONS	 Additions to Agenda Confidentiality statement Updates to compliance policies/procedures Follow up from previous meeting No follow up DMC Site Review Updates Amy Dillon provided information on the new DMC site review model. Revised Monitoring Program to reduce duplication and make reviews more manageable and meaningful. Three-year cycle, year 1 occurring now. Switched to a fiscal year review cycle. Intent is to review a lot of documentation in the CRM system. This does not include all audits. FY24 upcoming reviews HSAG EDV review (NEW) HSAG EDV review (NEW) HSAG PMV Review MDHHS/MSHN Waiver Program HSAG PMV Review HSAG NAV Review HSAG NAV Review HSAG NAV Review	
	 MEV Site Reviews Gra reviewed trends related to the CMHSP site reviews and answered questions related to the MEV reviews. Most findings are for attributes E & G E. Services were provided by a qualified individual and documentation of the service provided falls within the scop of the service code billed. G. Modifiers are within guidelines Lack of IPOS documentation Modifier errors Unable to locate supporting documentation 	

 Incorrect rending provider billed Date/time/unit billing errors Averages: FY24 Q1 - 76.58 / FY24 Q2 - 77.41 / FY23 - 76.76 Recommendations: IPOS/PCP contains written signature by the consumer; parent/guardian Applicable staff are trained in IPOS prior to rendering services Documentation for services includes a note/narrative Staff trainings, certifications are uploaded to Box Evidence of voided encounters are uploaded in preparation for CAP Bria is currently working on a MEV Review guide which will provide information on how audit is conducted, what each attribute looks for, common finding, and FAQ's Draft OIG Quarterly Report Two new annual reports that the OIG is requiring with new elements, will be due towards end of January each year. Taking OIG quarterly report and adding new elements to make tracking easier for CMHSPs. Recommended revisions to the OIG quarterly form: Activities tab: AT/AU are new columns for annual submission. Dollars recovered (only for FWA cases) and Provider Specific Education. Added new tab: prepayment activities This includes information required on the 6.10 OIG report. Do not need to complete the cost avoidance dollars for Q2. Kim still talking to OIG about this being a requirement. Looking for count of claim lines denied (prepayment). We need to start tracking EOBS – Section 6.5 SAMSHA SUD Confidentiality of Patient records Update Kim went over a summary document recommending a new data analytics platform for MSHN. There were noq questions related to this and the compliance Plan