



## Council, Committee or Workgroup Meeting Snapshot

### Meeting: Information Technology Council

Date: December 18<sup>th</sup>, 2024

#### KEY DISCUSSION TOPICS

Amon Hodge, CEI  
AmyLou Douglas, SCCMHA  
Brian McNeill, GIHN  
Chad Brown, SCCMHA  
Christina Saunders, SCCMHA  
Holli McGeshick, SCCMHA  
Jane Cole, CMHCM  
Jesse Bellinger, BABH  
Jennifer Tucker, SHW  
Joanne Holland, CEI  
Jill Carter, TRD  
Kevin Faught, CMHCM  
Kyle Aubry, SHW  
Laura Rickwalt, TBHS  
Lynn Martin, NCMH  
Martin Slominis, CMHCM  
Michael Potter, HBH  
Nathan Derusha, TRD  
Rebecca Marshall, SHW  
Richard Smith, TBHS  
Terry Reihl, MCN  
Theresa Adler, BABH  
Steve Grulke, MSHN  
Shyam Marar, MSHN  
Joseph Wager, MSHN  
Kara Laferty, MSHN  
Ron Meyer, MSHN

#### Consent Items

1. Roll Call, November 20 snapshot – All

#### Informational Items

2. MDHHS communications? – Steve
  - a. BH TEDS Completion percentage table (Nov 20)
  - b. MCG email discontinuing support for Internet Explorer (Nov 21)
  - c. November Medicaid closure file (Nov 22)
  - d. Invalid NPI list (Dec 2)
  - e. Duplicate payment recoupment (Dec 2)
  - f. FY25 BH TEDS specs/instructions (Dec 3)
  - g. Encounter Recon file (Dec 6)
  - h. Missing BH TEDS file (Dec 10)
  - i. Invalid NPI list (Dec 18)
  - j. December Medicaid Closure file (Dec 18)
3. BH-TEDS and Encounter submissions – Shyam/Ron
4. BH TEDS extract reports working
5. BTPRC data collection.
6. HSAG PMV/NAV reviewed draft – final report received
7. Sandy's SDoH work plan email.

8. MSHN strategic plan – send out draft in a couple weeks, need feedback during our December meeting.
9. Announce Analytics workgroup update?
10. Compliance Software vendor update
11. Council/Committee Strategic Plan and Balance Score Card
12. QIC requesting PCE users workgroup
13. EVV use of HHAExchange or other system of your choosing.
  - a. MSHN access to HHA through each CMH - Wager
14. CIO forum update – November 22 (Notes in folder)
15. Other – All
  - ITC meeting on January 15 –Zoom call only.
16. CCBHC IT operational concerns/questions (as time allows)
17. BHH IT subgroup (as time allows)
  - Central, Montcalm, Newaygo, Saginaw, Shiawassee and GIHN

- Although completion percentages for BH-TEDS as of November 20<sup>th</sup> was low, it is expected that these numbers will increase. The last time this happened, MDHHS had changed the criteria in the process for pulling the report, which increased us to acceptable levels again.
- Medicaid closures remain steady and expected since the end of the PHE
- Members will be notified when the Encounter Recon file is available.
- MSHN will be addressing your lists of dangling admissions that seem to be outside of your purview to fix.
- Medicaid Closure Files are reported to Ops Council, as well as uploaded via FTP.
- Encounters and BH-TEDS submissions have gone through successfully. Additionally, extract reports are up and running normally.

✓ KEY DECISIONS

- Steve has contacted the Clinical Leadership Committee about greater detail over the requirements for BTPRC data collection. More information should be forthcoming shortly.
- The HSAG PMV/NAV final report has been received and will be shared.
- Kara Laferty will be addressing the feasibility of Sandy's Social Determinants of Health work plan. It was created to address the minimal amount of change in Housing and Employment statistics with respect to verifying and validating the accuracy of BH-TEDS reporting.
- Recommendations for improvements to the Balanced Score Card and the MSHN Strategic plan have been requested from ITC.
- The analytics workgroup will be pushed back slightly
- Healthicity has been chosen as the compliance software vendor. MSHN will be moving forward with contracts after the first of the year.
- The details surrounding the QIC-proposed PCE Users Workgroup are still being debated.
- Joanne Holland reports from the HHAX vendors meeting that all identified problems have been resolved and that there are no major issues with either the authorization or the provider file. Their current focus is on the CMHSPs that are using HHAX to operationalize it in their systems. CEI is developing in-house processes and helping their staff. Additional open FAQ sessions were recommended.
  - It was identified that the HHAX software cannot reorder modifiers. It has been requested that all modifiers are alphabetized within each submission.
- CIO Forum: NMRE is losing approximately \$600M in revenue from individuals being auto-enrolled in other programs. NMRE and PCE are working together to do a statewide analysis, as PCE is the system for 9 of the 10 PIHPs. Of particular concern is people being auto-enrolled in something from Disabled and Blind, which should not be happening. If the analysis reveals that money is systemically being lost, it is unlikely that compensation will be received.

	<p>CCBHC:</p> <ul style="list-style-type: none"> <li>• Central has established a workgroup to evaluate whether or not the CMHSP will seek to become a CCBHC. Previous CCBHC applications have been submitted by Central in prior years.</li> <li>• A house bill has been proposed to make CCBHC funding permanent.</li> </ul> <p>BHH:</p> <ul style="list-style-type: none"> <li>• Central will not be moving forward with the DECIPHeR program. Gratiot will not be abandoning it, but will not be developing it further, either. Shiawassee has everything that the program would be providing already in place in their EMR.</li> </ul>
<p>✓ <b>ACTION/INPUT REQUIRED</b></p>	<ul style="list-style-type: none"> <li>• CMHs will send on problem Dangling Admissions files for IT to address.</li> <li>• Joanne Holland will send any questions/topics for training to HHAX</li> </ul>
<p>✓ <b>KEY DATA POINTS/DATES</b></p>	<ul style="list-style-type: none"> <li>• Next Meeting January 15<sup>th</sup>, remotely.</li> </ul>