

Council, Committee or Workgroup Meeting Snapshot

Meeting: Regional Compliance Committee

Meeting Date: December 15, 2023

Attendees:

BABH, CEI, CMHCM, GIHN, Huron, MCN, Newaygo, Right Door, Saginaw & Shiawassee

MSHN Staff: Kim Z.

Not Present: LifeWays & TBHS

*This meeting was held by zoom only

KEY DISCUSSION TOPICS

- Agenda Review
- Follow Up from Previous Meeting
- MSHN Compliance Plan Revisions
- Respite notes
- IPOS training
- Parental Access to Portal of Minors
- ORR-Interpretive Memo 05
- OIG Quarterly Report
- Open Discussion

✓ KEY DECISIONS

- Additions to Agenda – No additions to the agenda
- Follow up from previous meeting
 - ✓ Proposed language for the Program Integrity section of the contract will be added
- MSHN Compliance Plan revisions
 - ✓ OIG is requiring significant changes related to policy, procedure and reporting requirements. MSHN is reflecting this in its Draft Compliance Plan and compliance policies and procedures to include all the very prescriptive requirements.
 - ✓ MSHN will have oversight to ensure CMHs are in compliance with OIG requirements.
 - ✓ OIG also requiring additional reports from the PIHP, which are labor/resource intensive. The intent is to establish automated processes for tracking/reporting.
- Respite notes
 - ✓ Group discussion: respite timesheets are not being accepted in reviews as adequate proof of “documentation” or “notes.”
 - ✓ Per Kim, as long as it is part of the Plan, and can find something in the chart relevant that matches the billing (with consumer name, date, time, provider, and that it was respite), then this should be sufficient, based on the purpose of what respite services are. Kim will go back to MSHN auditors to clarify.
- IPOS training
 - ✓ Track IPOS trainings: how to keep up with it, especially with the intensive staff turnover rates?
 - ✓ Some CMHs are logging trainings via a form right in their EHRs. Pam screen-shared Gratiot’s format.
- Parental Access to Portal of Minors
 - ✓ CEHR/patient portal account: at age 11, there is some law related to healthcare accounts turning into a limited access account, so there should be the ability to limit access to the CEHR account.
 - ✓ Right Door (Susan) did ask PCE, but they did not have much response on this question.
 - ✓ Susan (Right Door) & Sally (MCN) will look into this and share information found regarding the citation.
- ORR- Interpretive Memo 05
 - ✓ Question raised on the memo from Office of Recipient Rights, and question on whether IRs are considered Peer Review documents which then allows by law to not be subject to disclosure.
 - ✓ Kentera (Saginaw) shared an email she had with MDHHS ORR on this topic, which clarifies the IRs are not peer review documents and are not kept in the consumer chart. (Reference Kentera’s email, dated



12/15/23)

- OIG Quarterly Report
 - ✓ Some changes to the report and guidance related to how OIG is categorizing items (“provider” or “facility”, etc.) Also, there is new guidance on overpayments: if no encounters were submitted to MDHHS or if the encounters were not accepted by MDHHS, then don’t record as an overpayment. Also changes on: Adverse Actions, activity Type/Source, reporting Provider Audits, and summary of Resolutions/Findings.
 - ✓ See Kim’s email dated 12/15/23 with description of changes, updated template, and updated guidance document and document with redlines.
 - ✓ Submit Q1 report as best as possible with reference to the email sent; Kim and Amy will review and assist.
- Open Discussion – no additional discussion

✓ **KEY DATA POINTS/DATES**

- Next Meeting: February 16, 2024 (3rd Friday of every other month from 10:00am – 12:00pm)