

Meeting Date: March 16, 2026

MSHN/CMHSP Representatives:

In-Person: Online Only

Via Zoom: A. Andrykovich (SHW), A. Fletcher (NCMH), B. West (CMHA-CEI), C. McIntyre (MCN), C. Surque (LifeWays), E. Shaffer (CMHCM), J. Lynch (CMHCM), J. Kish (BABH), J. Morgan (TRD), K. Cereske (BABH, HBH, TBHS), K. Medes (CMHA-CEI), M. Taylor (SCCMHA), P. Faching (GIHN), Consumer Rep., and D. Dedloff (MSHN)

KEY DISCUSSION TOPICS

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| <ul style="list-style-type: none"> • Welcome and Introductions • Review and approve the January 26, 2026, meeting snapshot <ul style="list-style-type: none"> ○ Review follow-up action items • Review and approve the current agenda • MSHN Guide to Services Update • MSHN Network Adequacy Assessment Review • HSAG Compliance Review Action Items Follow-Up • Customer Service Inquiry Coordination Discussion • Customer Service Reports | <ul style="list-style-type: none"> • Member Suggested Topics • Regional Customer Service Enhancement • Open Discussion • Future Agenda Items • Updates • Next Meeting |
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• KEY DECISIONS

- Welcome and Introductions
- The Customer Service Committee (CSC) members approved the January 26, 2026, meeting snapshot.
 - Review follow-up action items – None
- The current agenda was reviewed and approved as written.
- An update on the FY26 Guide to Services Handbook process was provided. MSHN has received an initial approval from MDHHS, with formal approval coming soon. MDHHS Contracts department is reviewing the handbook content and may also provide feedback. An area that may need improvement is the information on the transition of care required to be included in the handbook. There is no standardized handbook template for transition of care, but an MDHHS policy exists, and MSHN is considering whether to add the policy information to the handbook. If no additional feedback is received from MDHHS, MSHN will send the handbook files to Allegra by the end of the week to initiate printing and delivery.
- The MSHN Network Adequacy Assessment was reviewed with members. Members considered questions about the assessment content but had no feedback.
- An update on HSAG Compliance Review action items for follow-up from the 2024 and 2025 reviews was provided. Enhancements have been added to the PCE Appeal and Grievance modules to address HSAG feedback. Members were encouraged to ensure that local reviews of adverse benefit determinations, specifically service request denials, are occurring, so that staff complete ABDs correctly and with the required information.
- Members were reminded of the desired coordination process for an MDHHS customer service inquiry. It was noted that the due date for any requested information and documentation is most often set a day or two before the due date. The extra time allows the documentation to be reviewed, a response to be prepared, and additional information to be provided. The desire is to provide a thorough response to MDHHS that does not require any additional follow-up. Additionally, customer service staff are to coordinate the response, and other content experts may be involved to assist with resolving the inquiry.
- Customer Service Reports –
 - The FY26 Q1 MDHHS Appeal and Grievance reports were reviewed. For FY26 Q1, 97.50% of appeals and 95.54% of grievances were processed within the required timeframe. No significant trends or concerns were noted during the review discussion.

	<ul style="list-style-type: none"> • Member Suggested Topics: <ul style="list-style-type: none"> ○ A member asked how others process ABA second opinion requests. The ABA service determination is a multi-step process. Some CMHSPs will complete a second evaluation if the first evaluation determined that the youth did not meet medical necessity criteria. A member reported that they have a second evaluator review the initial evaluation to determine whether the initial process was completed properly and to make a determination that supports or amends the initial determination; this process was taken to a Medicaid Fair Hearing, and the administrative law judge supported the position that a second independent full evaluation is not a Medicaid requirement. It was noted that virtual autism testing is often overturned upon completion of a second opinion in-person evaluation. • Standardization of Educational Material/ Brochures/ Forms Across the Region <ul style="list-style-type: none"> ○ Members were notified that the proposed time-limited MSHN workgroup to develop non-Medicaid citations for the adverse benefit determination (ABD) process was not going to move forward. Members may coordinate with other CMHSPs to develop non-Medicaid citations. • Open Discussion: <ul style="list-style-type: none"> ○ None • Future Agenda Items <ul style="list-style-type: none"> ○ FY26 Q2 MDHHS Appeal and Grievance reports
<ul style="list-style-type: none"> ▪ ACTION/INPUT REQUIRED 	<ul style="list-style-type: none"> ▪ None
<ul style="list-style-type: none"> ✓ KEY DATA POINTS/DATES 	<ul style="list-style-type: none"> ✓ Upcoming CSC meetings: May 18, 2026, 9:30 am to 11:30 am, via Zoom.