

Community Mental Health Affiliation of Mid-Michigan

Affiliation QI Minutes
January 9, 2004
9am – 12pm
CEI CMH

Present: Lynn Charping (Gratiot) Liz Holcomb (CEI), Paul Duff (CEI),
Tammy Quillan (Ionia), Chip Johnston (MB, by phone)

1. Meetings

There was discussion regarding the frequency of meetings. The group will begin meeting monthly along with emails as needed.

2. December QI/IS Conference Information

Critical information shared at the conference was discussed which included:

- CMS is requiring DCH to contract with an external organization to conduct External Quality Reviews (EQRs) of PIHPs.
- Eight of the MMBPIS indicators will need to be broken out and reported by Medicaid and GF populations effective 4/1/04. (Selected indicators: 1, 2, 3, 5, 8, 22, 34, 38)
- QISMC projects must demonstrate adherence to the QISMC standards and will be reviewed based on the EQR requirements.
- Alternative services becoming part of B waiver services and are appealable per CMS. DCH will be rewriting Chapter 3 to reflect this change.

3. QISMC Projects

Coordination of Care:

- ✓ Liz to draft letter inviting QHPs to meet on 2/5/04 at 1pm at CEI for the purpose of coordinating care. QI will meet before and after the meeting. CEI's Medical Director will be attending. Each affiliate can send no more than 3 representatives to the meeting.
- ✓ Goals of the meeting will be to identify and discuss past issues with coordination; to establish open lines of communication; to identify what information should be shared; and to identify contact people.
- ✓ Liz to verify with Judy Webb whether QHPs have been notified/reminded of the requirement for them to coordinate with CMHs.
- ✓ Each affiliate is to identify a sampling of 20-25 consumers to be the focus of this project. The consumers selected should have high medical needs, receive psychiatric services, have Medicaid, and be representative of children

- and adults and MI and DD. Reviews of these charts will be completed each quarter to monitor coordination efforts.
- ✓ Each affiliate to email staff to identify problems, barriers, or positive experiences in coordinating with QHPs.
 - ✓ Chip to work with Andrew Hewatt to develop a QHP Coordination Agreement.
 - ✓ Need to develop tool for quarterly chart reviews.

Person Centered Planning

- ✓ Will continue with project as it currently stands. Each affiliate needs to identify specific areas for improvement.

4. Medicaid Claims Methodology

DCH seems to be confused as to whether our revised methodology was received. Tom Renwick acknowledged receipt but a letter was sent from his office indicating it was not submitted. Liz will request a copy of a letter that was to have been sent to the PHPs on the format for the methodology and resubmit it. DCH is now wanting the methodology to be “statistically defensible”; however, there is much debate as to what that means.

5. Utilization Management Update

The Utilization Management Committee is now the UM/Clinical Best Practice Committee. The first phase of the group will be to set up utilization management processes across the affiliation. The second phase will be to identify clinical best practices.

6. Compliance Plan

Clarified that contractors can agree to comply with the affiliation’s compliance program or submit evidence of their own program. The Contract Management Committee is responsible for ensuring contractor compliance.

7. Mystery Shopper Program

The mystery shopper program did not go to Core Group in January. Lynn to work with Jana to get a final draft sent out and on the Core Group agenda in February.

8. Next Meeting

2/5/04, 10am at CEI – Prep for QHP meeting at 1pm