

CMHAMM
Work Group Meeting Minutes

<p>WORK GROUP NAME: Quality Improvement</p> <p>LOCATION: Ionia CMH</p> <p>DATE: 7/21/06</p>	<p>PRESENT: (please bold note-taker)</p> <p>Paul Duff, CEI Fran Jozefowicz, CEI Stefanie Zin, CEI Lynn Charping, Gratiot Sally Culey, Ionia Chip Johnston, Manistee-Benzie Cindy Ingersoll, Newaygo Susan Kilgore, Newaygo</p>	<p>cc: Work Group Members:</p> <p>Liz Holcomb, CEI Paul Duff, CEI Fran Jozefowicz, CEI Pamela Stants, CEI Stefanie Zin, CEI Lynn Charping, Gratiot Sally Culey, Ionia Chip Johnston, Manistee-Benzie Susan Kilgore, Newaygo Cindy Ingersoll, Newaygo</p>
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New, Follow-up, Ongoing	Topics Discussed	Discussion/Decisions	Action/Responsible Party	Due Date	Status (complete, barrier to completion)
Ongoing	1) Review of last meeting minutes	1) Today is the due date for performance indicator corrective action plans. All in except for CEI.	-----	-----	
Ongoing	2) QISMC Projects	2) #1: Quarter 3 Record Review data is due. Submit to Liz electronically if possible. Will have Liz send out format. #2: Baseline data due. Liz has obtained the necessary information from Darren Lubbers.	#1: Submit Q3 record review data to Liz #2: Submit baseline data to Liz	7/31/06 7/25/06	
New	3) Customer Satisfaction Surveys	3) Reviewed 2005 data. A number of questions raised regarding survey questions and procedures for 2006 which will be asked of Richard Coelho. Will seek response from him prior to starting our 2006 surveying in August. - <u>Closed Surveys</u> : Discussion on needing to increase return rates. Also, going to check with Richard Coelho about tracking closed case surveys by program and reason for case closure. This would help in interpreting results. Also, in 2005 data, is the correct number of respondents 569 or 804? Both numbers were used in the report.	Susan will email Richards C. with our multiple questions.	7/26/06	

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Follow-up	4) Medicaid Claims Verification	<p>*All surveys are to be returned to Richard by the surveyed person, unless they are collected in a suggestion box.</p> <p>4) Reviewed affiliation data report. Manistee-Benzie to resubmit data for 2 quarters. Overall, total number of Medicaid claims has increased (due to better reporting? Better penetration/increased number of services?). Lengthy discussion on procedures and reporting: -CEI is under-reporting residential claims -Manistee-Benzie is over-reporting residential claims -Will look at inpatient data annually as a separate report -Will institute a corrective action plan procedure for those not meeting a set standard of verifiable claims (threshold to be set at next meeting once current data is completed.) -Everyone needs to review their data reporting procedures to ensure correct reporting. Sally to revise reporting form to make clarifications on “verifiable” vs “correctable.”</p>	<p>All affiliates double-check data for accuracy and completeness.</p> <p>Sally: revise reporting form and email to affiliates.</p>	<p>8/4/06</p> <p>8/4/06</p>	
Follow-Up	5) Grievance & Appeals/	<p>5) -Quarterly reports on G&A’s need to be submitted to Liz. -Informal denials also are to be sent to Liz. Detailed discussion ensued on informal denials. Need to ensure that all affiliates are defining and handling informal denials in the same way. Formal denials: those denials following a 1st appointment where an assessment is done (intake); are part of performance indicator</p>	<p>Submit quarterly G&A reports to Liz</p>	<p>8/12/06</p>	

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		<p>reporting. Require that notices be sent per regular procedure. Informal denials: those denials that occur at the time of request for service or phone contact where prior to an assessment. There is some uncertainty among affiliates on whether or not notices need to be sent, and under what circumstances, related to informal denials. This will be revisited at our next meeting for further discussion.</p> <p>(6 & 7: No QI or Compliance Issues reported this meeting.)</p> <p>8) Other: -Customer Services Standard: it will be taken to the CFI group that a dedicated line, separate from the 800 line, is not needed. -Credentialing policy/procedure: need to look at how this impacts our affiliation and workgroup in terms of our QAPIP.</p> <p>Thanks to Susan for all her great ideas today! J</p> <p>9) Next Meetings: 8/4 9-2 @ Gratiot in gym (9-11 is SE/RCA training)</p>			
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