Community Mental Health for Central Michigan

Provider Network Meeting Minutes

Date: November 10, 2015
Time: 10 a.m.
Place: Isabella Office – Lake Michigan Conference Room
Meeting called by: Tonya Lawrence, Provider Network Manager
Type of Meeting: Regular
Note Taker: Kim Harner
Attendees: Provider Network and CMHCM Staff
Attendees (via conference phone): Provider Network and CMHCM staff at CMHCM Mecosta, Midland and Osceola Offices
cc: Cindy Bay-Baron – Quality Advisor, Dawn Tanner – Safety Officer, Karen Bressette – Customer Service Coordinator, Executive Leadership Team (ELT)

Agenda Topic: Announcements
Presenter: Tonya Lawrence
Discussion & Conclusions: In October, MDHHS released a new technical requirement for Medicaid Event Verification procedures to ensure the verification of clean and appropriate claims/encounters. MSHN will conduct quarterly audits beginning 12/15/15 with the potential for plans of correction and paybacks for events found not compliant, including not medically necessary. When CMHCM receives the checklist to be used by MSHN, it will be shared with providers. The technical requirement will be reviewed by the MSHN Operations Council. When a final version is available, it will become part of the CMHCM provider manual and a copy sent to providers.
Question: How many claims will be picked quarterly?
Answer: Between 10-50; CMHCM will let providers know if one of their consumers has been selected.

CMHCM has received a request for training on proper documentation for DCWs. A training will be coordinated.
The Provider Training Grid has been updated with the minimum standards from MSHN and will be sent to providers in the next couple of weeks.
The Provider Network department is in the process of including a contractual mandate for verification of any substantiated recipient rights violations against any employee prior to performing direct activities with CMHCM consumers.
CMHCM is exploring setting thresholds for debarment of individuals who have a history of particular substantiated recipient rights violations to prevent such individuals from providing any future direct service with CMHCM consumers.
LSSM will be changing their name in the first quarter of 2016.

Action Items, Person Responsible & Deadline:
Tonya will coordinate a forum for proper CLS documentation. An email invitation will be sent.
The updated Provider Training Grid will be emailed to providers.
**Agenda Topic:** State of the Agency

**Presenter:** John Obermesik, Executive Director

**Discussion & Conclusions:**
- John Obermesik is the new Executive Director.
- Bryan Krogman has been promoted to Deputy Director for Administration, overseeing the departments of Administrative Supports, Provider Network, Human Resources, Information Services, Quality Improvement, and Customer Services.
- Kathie Swan is the Deputy Director for Services. Kathie oversees all program services at CMHCM as well as Utilization Management, regional and state-level initiatives.
- LeeAnn Sloan has been promoted to Chief Financial Officer.
- Nancy Miller, CEO of MSHN, retired last month and the MSHN Board has selected Joe Sedlock as her successor.

Focuses of John’s State of the Agency address included:
- Importance of relationship between CMHCM staff and the Provider Network
- Mutual commitment to improving the public mental health safety net in the midst of continuing systems reform challenges
- Summarized the changes for the FY16 general fund contract
- New Freedom-to-Work standard which encourages people to work without losing Medicaid eligibility
- Michigan planning grant to compete to be one of eight states to demonstrate Certified Community Behavioral Health Clinics; basically providing enhanced rates for implementing stronger service standards for persons with a mental illness.
- Revised Clubhouse standards that require national Clubhouse accreditation.
- State minimum wage and provider network; the wage issue is being examined by the MDHHS Medicaid Rate setting Workgroup and Milliman, the actuarial firm for the state.

**Agenda Topic:** HCBS Update

**Presenter:** Barb Mund

**Discussion & Conclusions:** Please see attachments

- Home & Community-Based Services (HCBS) Rule Update
- Residential Home Community-Based Services Waiver
- Readiness Questionnaire
- Home & Community-Based Service Transition

**Question:** If a provider has multiple settings and one consumer is picked, will it be just that home the consumer resides at that will be reviewed?

**Answer:** Just the home the consumer is residing; expect two hours per individual.
Action Items, Person Responsible & Deadline:

**Agenda Topic:** CLS Presentation  
**Presenter:** Kara Kime  
**Discussion & Conclusions:** Please see attachment  
• Provider Network Training: Community Living Supports (CLS) Documentation & Process

Action Items, Person Responsible & Deadline:

**Agenda Topic:** Mid-State Health Network (MSHN) Update  
**Presenter:** Tonya Lawrence  
**Discussion & Conclusions:** Mid-State Provider Network is working on the following:  
• Reducing inpatient denials to CMHs  
• Adopting standardized Fiscal Intermediary practices for contracting, monitoring, training, and documentation  
• Region-Wide Inpatient Contracts with common rates – rate negotiations are happening  
• Assessing the SUD needs and possible expansion  
• Improved access for Veterans  
• Assessing the needs for inpatient and crisis for possible expansion  
• Preparation for Autism expansion – serving individuals up to age 20  
• Updating the Provider Directory so all providers under MSHN are available on their website.

Action Items, Person Responsible & Deadline:

**Agenda Topic:** Recipient Rights Update  
**Presenter:** Kris Stableford  
**Discussion & Conclusions:** Please see attachment - Abuse & Neglect  
Action Items, Person Responsible & Deadline:  
Please email or call Kris Stableford with any questions or concerns.  
989-772-5938 or kstableford@cmhcm.org

**Meeting adjourned at:** 12 noon  
**Next meeting date:** May 10, 2016