

LCMHA PROVIDER MEETING

November 19, 2014

MINUTES

Present:

Renee Shaw	Harbor Light	Liz Logan	Christ Centered Homes
Jana Penrod	Behavior Educators	Tammy Ratz	New Beginnings
Jean Kass	All Care Inc	Andrea Parshall	Lifespan. A Community Service
Mark Roman	Inter-Connections	Tracy Cox	Lifespan. A Community Service
Karla Mangrum	Goodwill	Tammy Jewell	DOA/Daybreak
Carolyn Halliwill	Goodwill	Jill Clark	Highfields
Kristy Gottschalk	Renaissance	Jessica Tripp	Renaissance
Amanda Iffland	Renaissance	Scott Brown	Renaissance
LuAnn Sawdey	Highfields	Tiffany Collins	Renaissance
Marilynn Schneider	Highfields	Karen Rawlings	LCMHA
Sandy Keener	LCMHA	Kathryn Szewczuk	LCMHA
Wendy Cadieux	LCMHA	Katie Snay	LCMHA
Judy Warren	LCMHA	Shar Dunbar	LCMHA
Kay Ross	LCMHA	Beth Deo	LCMHA

1. Executive Director, Sandy Keener
 - a. Welcome, and introductions. This is an opportunity to provide an update to all of our providers, as well as receive feedback from them.
 - b. This year has been an emphasis on integrated health. CMH staff is being trained in all areas of consumer health as we strive to become Care Managers for our consumers. Primary care needs are just as important as mental health/substance abuse etc. We are trying to ensure our consumers live healthier lifestyles as a result of the State of Michigan Plan for Reinventing Michigan Health Care. Our consumers are included in the 5% of the population who utilize 50% of health care resources. They have a higher rate of ER use and hospital admissions as they have complex medical needs. The goal is to bring those numbers down. We have been a part of developing the integrated services at the Family Medical Center, which is now open on N. Main St, Adrian, because many of our consumers did not have access to primary care physicians. It is now a reality and we have moved our psychiatrists, nurses, integrated health care staff and a peer support specialist to the FMC. Consumers will also have access to the dental clinic, lab services, and DHS staff. They will have integrated health care plans as a collaborative effort to improve overall health. Those consumers who have other primary care physicians will have Case Managers coordinate their care also.

- c. PIHP. Last year we became a region (not an affiliation) with oversight from the regional board, which includes mental health and substance abuse disorder services. The Coordinating Agencies integrated into the PIHP, and last year all but one SUD provider was integrated. Effective October 2014 Monroe was integrated into the SUD region. Also this year we were awarded an SUD Prevention contract along with the Treatment Contract.
 - d. Waivers. We are hearing from CMS that all waivers are being combined as they come up for renewal in December to streamline administrative functions. The intent is that those with disabilities, or age related disabilities will receive services in the community the same as everyone else. It is unsure at the moment how this will affect our services. The website: www.Medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html has materials, guidance and a toolkit. There will be a transition planning and implementation phase to make the changes required by the final ruling. All of the settings including residential/group homes and assisted living and pre-vocational and vocational services will be assessed for compliance with the final rule. Scott Brown provided info from a conference. Main points in the interpretation of the rule: – every room has to have a lockable door; consumers have free access to food; visitors should be allowed at any time, day or night and consumers should be able to come and go freely at any time. Current concerns revolve around keeping our consumers safe. Family members; consumers; guardians should be made aware of the coming changes, and providers will need to be flexible and creative. This will affect all AFC homes and licensing, and the state still has much work to do. This also affects pre-vocational, vocational and skill building programs.
- 2. Recipient Rights Officer, Katie Snay
 - a. Remedial Action Requested. A new requirement from the state requires remedial action to be completed prior to the summary report being sent to family members/guardians. Currently this is in the Plan of Correction which has to be completed within 7 days. Please include dates (and completion) of remedial action when submitting paperwork to the Rights Office. This enables an appeal within the appropriate time frame.
 - b. We are seeing a good trend in staff being the named complainant. Managers should continue to encourage staff to report any rights violations they witness.
 - c. Site Visits. Visits will begin again for 2014/15. Providers please ensure staff has access to/or have copies of all up to date Recipient Rights policies. These are available here: <http://washtenawcho.org/admin/Policies/Policy-By-Chapter/Pages/Chapter%208%20-%20Recipient%20Rights.aspx>
The Recipient Rights policies are updated every 3 years, and most were updated in 2013/14.
 - d. Training. All staff are required to have a 30 day orientation to Recipient Rights, and then attend a face-to-face training within 90 days of hire. This training is required every

two years, and is part of the contract. A training schedule is available on the CMH website. Registration is required with Karen Rawlings at 263.8905 or krawlings@lcmha.org, also please advise her if you have to cancel, as these trainings are usually pretty full. If you find it difficult to send staff for any reason, please call Katie Snay and she will work with you on a separate training if necessary.

- e. After Hours. With the new telephone system it is not possible to leave a voice message for Katie after hours. It is necessary to call her direct line: 517.264.0192. New posters with this number are available if you wish to take some for your locations. Katie will also be distributing these when she performs the site visits.
 - f. Incident Reporting. Just a reminder that incident reports should be completed within 24 hours of the incident happening.
 - g. MDCH Rights Audit. Rights Offices are audited by the state every 3 years. LCMHA Rights audit is scheduled for December 11th & 12th.
3. Customer Service Representative, Kay Ross
Customer Satisfaction Surveys will be conducted by the CS Department throughout the year. DD consumers will be done face to face; all others will be done by telephone. All complaints that are not rights related come through Kay's office. Please direct any questions/concerns to the Customer Service Office. Most complaints can be handled without filing a grievance. Kay is also available for any public events/talks/presentations etc. Mental Health Awareness Committee is hosting the 10th Annual Christmas Party for consumers on December 4th from 11am – 1pm. We are also bringing back a Consumer Action Committee, which will be a board appointment to review policies and provide consumer feedback to the board. Contact Kay for an application if you have anyone in mind.
 4. Contracts Coordinator, Shar Dunbar
 - a. Provider Monitoring. We have just completed the second year after this function was delegated back to us from the PIHP. Providers have been very responsive when a plan of correction has been needed. This monitoring should be beneficial to the provider as well as CMH. The monitoring tools continue to be improved, and they are used by everyone in the region.
 - b. Contracts Update. Most contracts have been issued, except Substance Abuse, and these should be going out next week. Providers are encouraged to check the WCHO website for training materials, policies and claim instructions. A new Provider Manual is being compiled by Network Management Committee.
 - c. Credentialing. Packets have been sent out, and if everything is in order credentialing is approved for two years. If not a six month revision for corrections to be made is issued. A provider noted that ichtat (state website for criminal background checks) is not always accurate. However, you can go to the courthouse and they will look up the information for you, and have local records readily available.
 5. Compliance Director, Kathryn Szewczuk
Kathryn presented information on DRA; HIPPA; BBA; FFCA; CMHSPM Compliance Program; Affordable Care Act and Fraud, Abuse & Waste. Sandy Keener noted that CMH has instituted a

peer review program. Staff is reviewing records continually to ensure they are clear about medical necessity and documentation in the chart. Treatment Plan and Service Plan must match and be documented correctly. Providers are encouraged to conduct peer review audits. Medicaid Integrity training is available on the WCHO website, as well as the LCMHA website. We are expecting a Joint Commission survey any time in the next few months.

6. Provider Questions and Comments

- a. Monroe County Substance Abuse Coalition is hosting a second Heroin Summit on December 2nd at Monroe County Community College.
- b. Customer Service packets were distributed by Kay Ross
- c. A provider complimented CMH staff who are always very pleasant to work with
- d. Providers are encouraged to supply feedback regarding issues/problems at any time

Meeting adjourned at 11:20am.