



## Quality Operations Technical Assistance Workgroup Meeting Agenda

Wednesday, October 28, 2020

Via Blue Jean Platform

9:30 a.m. – 11:00 a.m.

- |      |   |                               |
|------|---|-------------------------------|
| I.   | Announcements   | A. Siebert/T. Greason         |
| II.  | DWIHN Policy Review:  |                               |
|      | a. Ability to Pay   | Tania Greason                 |
|      | b. Care Coordination  | Tina Forman                   |
|      | c. Crisis Plan and Procedure                                    | Jackie Davis                  |
|      | d. Access   | Jackie Davis                  |
|      | e. Network Monitoring and Management Policy                     | Melissa Eldredge              |
|      | f. Telehealth Services  | April Seibert                 |
| III. | NCI Survey Update   | Margaret Keyes-Howard         |
| IV.  | Mission Based Performance Indicator                             | Justin Zeller & Tania Greason |
|      | • 4 <sup>th</sup> Quarter Data (Due to MDHHS December 30, 2020) |                               |
|      | • Performance Indicator Workgroup                               |                               |
| V.   | Critical and Sentential Event Update (add on)                   | Carla Mackey-Spight           |
| VI.  | Provider Feedback   | T. Greason                    |
| VII. | Adjournment   |                               |



**Quality Operations Technical Assistance Workgroup Meeting**

**Wednesday, October 28, 2020**

Via **Blue Jean Platform**

**9:30 a.m. – 11:00 a.m.**

**Note Taker: Aline Hedwood**

**1) Item: Announcement – A. Siebert/T. Greason**

**Goal:**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>April Siebert and Tania Greason informed the group of the following announcements:</p> <ul style="list-style-type: none"> <li>• The <i>MHDDS HSW 1915© Waiver Site Review</i> exit interview was conducted on October 27<sup>th</sup>.</li> <li>• DWIHN will prepare a comprehensive plan-of-correction (POC) that will outline compliance with noted citations.</li> <li>• The full comprehensive <i>MDHHS HSW 1915 (c) Waiver Site Review Report</i> will be submitted to DWIHN within 14 days.</li> <li>• DWIHN will have a total of 30 days from the date of receipt to complete and submit the POC to MDHHS.</li> <li>• Providers will be notified of POC required information for the MDHHS HSW 1915 (c) Waiver Review.</li> </ul>		
<ul style="list-style-type: none"> <li>• Dr. Margaret Hudson-Collins, DWIHN Chief Medical Officer last day at DWIHN is October 31, 2020.</li> </ul>		
Action Items	Assigned To	Deadline
None Required.		



**2) Item: Substance Use Disorder (SUD) Update – Judy Davis**

**Goal: Update of DWIHN’s SUD program**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Judy Davis provided an overview for the following:</p> <ul style="list-style-type: none"> <li>DWIHN’s SUD (ASAM) assessment tool will be available for providers. The tool is recommended for all PHIP’s to use and is currently being reviewed by MDHHS, once approved by MDHHS the tool will become available for providers.</li> <li>SUD providers that provide services to MDOC members must make certain that progress notes are complete and accurate for submission to the members designated Probation Officer.</li> <li>SUD’s 5<sup>th</sup> <i>Annual Opium Virtual Summit</i> is scheduled for November 12-13, 2020.</li> <li>If providers have not yet received their contract for SUD treatment, please reach out to Judy or Matthew. Please make certain that you review and sign the contracts as required.</li> </ul>		
Action Items	Assigned To	Deadline
None required.		

**3a) Item: DWIHN Policies: Ability to Pay – Donnette Brown (tabled)**

**Goal:**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
Action Items	Assigned To	Deadline
Tabled for next meeting.		



**3b) Item: DWIHN Care Coordination Policy – Tina Forman**

**Goal: Review of Care Coordination Policy**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Tina Forman provided an overview and noted revisions for <i>DWIHN's Care Coordination Policy</i>. The stated purpose of the policy is to facilitate timely and appropriate delivery of healthcare services to members to ensure members needs and preferences with healthcare services are met and to improve information shared across people, function and to provide high quality person center care outcomes. This policy applies to all DWIHN staff and providers, all populations served by DWIHN and lines of business. For additional information please review "<b>DWIHN Care Coordination policy</b>" posted on DWIHN's website.</p>		
Action Items	Assigned To	Deadline
None Required.		



**3c) Item: DWIHN Crisis Plan and Procedure Policy – Jackie Davis**

**Goal: Review of Crisis Plan and Procedure Policy**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Jackie Davis provided an overview of the <i>Crisis Plan and Policy and Procedure</i>. There were not many noted changes to the policy. The purpose of the <i>Crisis Plan Policy and Procedure</i> is to ensure all individuals/families receiving services within the DWIHN system are presented with crisis/safety planning to develop individual crisis plans to assist in preventing crisis situations and/or managing crisis situations that may occur. The crisis plan in MH-WIN is a check list to for providers to help them develop a crisis plan, however it doesn't summarize everything that goes into the plan. DWIHN providers are responsible for ensuring reliable training curriculum while also maintaining records of completion. Staff should be trained on the philosophy, development and implementation of crisis plans. Jackie Davis is in the process of planning a workgroup to discuss the crisis plan process. Providers must document their attempts to engage and contact members. Case Manager or Supports Coordinator or other staff from the Clinically Responsible Service Provider (CRSP) shall provide informational materials (brochure) on what crisis planning entails, template of the crisis plan for completion, and an explanation of the process. For additional information please review "<b>DWIHN Crisis Plan &amp; Procedure policy</b>" posted on DWIHN website.</p>		
Action Items	Assigned To	Deadline
<ul style="list-style-type: none"> <li>• The providers suggested some modification specifically related to children because the current crisis plan policy does not work well for the children.</li> <li>• Providers sent information to the Children Initiative at DWIHN and were told to only use DWIHN crisis plan.</li> <li>• The providers want to make sure DWIHN is including the IDD populations when creating these documents because often time things is focus and gear toward adults only.</li> </ul>	Jackie Davis	February 2021



**3d) Item: DWIHN Access Policy – Jackie Davis**

**Goal: Review of DWIHN Access Policy**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Jackie Davis provided an overview of DWIHN’s <i>Access Policy and Procedure</i>. The purpose the <i>Access Policy and Procedure</i> is to establish the standards and protocols for consumer access to behavioral health services. Services must be available in a timely fashion, meeting medical necessity. Initial screenings shall be available 24 hours a day, seven days a week. Should the need be assessed as an emergency, crisis services are to be provided immediately. If the consumer has urgent needs, an assessment will be completed as soon as possible, within 24 hours. For routine needs, service will be delivered within 7 days. In addition, effective February of 2021, DWIHN will be bringing the ACCESS services center inhouse; the contract with Well Place will end on January 31, 2021. For additional information please review “the <b>Access policy</b>” posted on the DWIHN website.</p>		
Action Items	Assigned To	Deadline
None Required.		



**3e) Item: Network Monitoring and Management Policy – Melissa Eldredge**

**Goal:** Review of Network Monitoring and Management Policy

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Melissa Eldredge provided an overview of the Network Monitoring and Management policy. The purpose of the Network Monitoring and Management policy is to provide the Direct Contractors, and contracted County Departments with the process and procedures that DWIHN utilizes to assure that they comply with all applicable standards, regulations and laws ensuring that there is a comprehensive array of behavioral health providers. Melissa also discussed and reviewed the provider closeout plan which is located on DWIHN’s website. Providers must provide DWIHN with a 30 day advance notice if there is a closure or movement of a program or program closure. In the event a Provider’s contract is terminated DWIHN’s Provider Contingency/Close Out Plan will be implemented. A template is attached to this policy entitled <i>Detroit Wayne Integrated Health Network Provider Contingency/Close Out Plan</i>. Providers must also submit in writing a termination of notice addressed to DWIHN CEO and your assigned contract manager with the effective date of termination. Providers are also required to submit the provider information exchange form, the services agency profile (SAP) and the members demography spreadsheet. The required providers closure forms are also located are on DWIHN’s website. For additional information please review “<b>DWIHN Network Monitoring Management Policy</b>” posted on DWIHN website.</p>		
Action Items	Assigned To	Deadline
None Required.		



**3f) Item: Telehealth Services Questionnaire – April Seibert**

**Goal: Review of the Telehealth Services Survey**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>April Siebert discussed with the group that DWIHN has submitted to both our providers and practitioners a <i>Telehealth Services Questionnaire</i>. The purpose of the <i>Telehealth Questionnaire</i> is for DWIHN to get a better understanding of how telehealth services are being used within our provider network and our community. Questions from the questionnaire include which providers/practioners are using telehealth services, what HIPAA platform is being used, are providers using a consent for treatment, provider organization timeframe for tracking in person face to face services. Providers have voiced concerns with regards to receiving the member’s signed consent form. It was noted and documented in the survey that providers were not receiving timely consent forms from members or guardians.</p> <ul style="list-style-type: none"> <li>• 22% of DWIHN providers was using a consent form for telehealth services</li> <li>• 40% of DWIHN providers was not using a consent form for telehealth services</li> </ul> <p>Due to 40% of providers not utilizing a consent form, DWIHN has included a consent form for provided services. The consent form is an attachment to the telehealth service policy. Providers are also required to utilize a HIPAA compliant platform which meets the BBA requirements.</p>		
Action Items	Assigned To	Deadline
<p>The provider voices concern is regards to obtaining members and guardians signed consent forms for services due to the Covid-19 pandemic. QI will review provider concerns with administration for continued review and report back to the workgroup the process for obtaining consent signatures.</p>	<p>QI- April Siebert</p>	<p>January, 2021</p>





**4) Item: NCI Survey Updates – Margaret Keyes-Howard (tabled until next meeting)**

**Goal:**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made	Assigned To	Deadline
Action Items	Assigned To	Deadline
Tabled for next meeting		

**5) Item: Michigan Mission Based Performance Indicator – Tania Greason & Justin Zeller**

**Goal: Review of MMBPI 4<sup>th</sup> Quarter Data**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI #4  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made	Assigned To	Deadline
Justin Zeller informed the workgroup of the following: <ul style="list-style-type: none"> <li>• 4th quarter MMBPI data is due to MDHHS on December 30, 2020</li> <li>• QI is finalizing 4<sup>th</sup> quarter MMBPI data. Providers must have reviewed and updated data on or before December 15<sup>th</sup>, 2020.</li> <li>• Justin will submit to providers out of compliance listing (POC) for Indicator # 10. Requested feedback by will be due by Friday November 13, 2020. The adult recidivism rate for Q4 has decreased to 16.6% (standard 15% or less). This is a great accomplishment from the 20-22% compliance rate reported for the past 4 quarters.</li> </ul>		
Action Items	Assigned To	Deadline
Assigned providers to review and complete MMBPI data for Q4 and submit POC's for Indicator # 10	DWIHN assigned providers	November 13 <sup>th</sup> , 2020 December 15 <sup>th</sup> , 2020



**6) Item: Critical and Sentinel Events Update – Carla Spight-Mackey (add on)**

**Goal: Update for CE/SE processing**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Carla Spight-Mackey informed the workgroup of the following:</p> <ul style="list-style-type: none"> <li>• The next critical and sentinel event webinar training will be on November 19<sup>th</sup>, 2020 from 9:00 am – 11:30 am. To register send staff name and credential; MH-WIN numerical ID#; email address to <a href="mailto:cmackey@dwihn.org">cmackey@dwihn.org</a> at least one week in advance of training day. Space is limited to 40 participants.</li> <li>• Provider Staff will only be allowed to enter CE/SE once they have completed the required training. Staff must be at a bachelor degree level and understand clinical processes.</li> <li>• The critical event is not complete/closed until all the required documentation are received and completed. Documentation must be received in timely manner as outlined in the CE/SE Policy and Procedure. DWIHN is required to report as outlined in our contract with MDHHS <u>all</u> reportable events.</li> <li>• Going forward CE/SE processing and reporting will be a standing agenda item.</li> </ul>		
Action Items	Assigned To	Deadline
None required.		

**Provider Questions/Comments**

**NEXT MEETING:** Wednesday, January 27, 2021 via [Blue Jean Platform](#)

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