

Quality Operations Technical Assistance Workgroup Meeting Agenda Wednesday, March 20, 2019 Second Floor Training Room 9:30 a.m. - 11:00 a.m.

I.	Announcements	T. Greason
II.	1 th Quarter Clinical Case Record o Due April 6, 2019	T. Greason
III.	Provider Best Practice	S. Smith/T. Greason
IV.	Quality Operations DWMHA – Website	S. Smith
V.	Behavior Treatment Plan Quarterly Data Submissions O Adherence to Standard for Behavior Treatment Plan Review Committee (FY 20)	F. Nadeem 18)
VI.	Michigan-Based Performance Indicator Reporting (MH_WIN) o System Transformation New Requirements	B. Klemm/Carla Spright-Mackey
VII.	Provider Questions/Comment	
VIII.	Adjournments	

Date: 4.4.2019 ah



Quality Operations Technical Assistance Workgroup Meeting Wednesday, March 20, 2019 Second Floor Conference Room 9:30 a.m. – 11:00 a.m.

Note Taker: Aline Hedwood

1) Item: Announcement – Tania Greason		
Goal: Strategic Plan Pillar(s):	stems Quality Workforce	
Discussion/Decisions Made		
NONE		
Action Items	Assigned To	Deadline
2) Item: 1st Quarter Clinical Case Records – Tania Greason Goal: Information for completing Quarter 1 Case Record Review Strategic Plan Pillar(s): Advocacy Access Customer/Member Experience Information System Standard(s)/Element #: X QI #2 CC# UM # CR # RR # Discussion/Decisions Made	stems X Quality Workforce	
 Tania informed the committee members that a notice has been submitted to providers randomly selected to complete Quarter 1 (2018-2019) case record reviews. Notices have been forwarded through outlook email and to MH_WIN secure email. Clinical case record reviews are due for completion on or before, Monday April 8, 2019. Tania will verify check to review providers that have completed case record reviews. Tania will send reminder follow-up to providers that have not yet completed their reviews. In addition, it is important that providers include the clinical case record reviews as part of a quality protocol within each organization. 		
Action Items	Assigned To	Deadline
Complete Quarter 1, 2019 Case Record Reviews (MH WIN)	Providers	April 8, 2019

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3) Item: Provider Best Practice – Tania Greason Goal: Information for providers submitting "Best Practice" topics for discussions. Strategic Plan Pillar(s): Advocacy Access Customer/Member Experience Information Systems X Quality Workforce NCQA Standard(s)/Element #: X QI #2 CC# UM # CR # RR # <Notes on discussion> Discussion/Decisions Made Tania stated she would like for this meeting to become a collaborative effort, the Authority knows

Discussion/Decisions Made		
 Tania stated she would like for this meeting to become a collaborative effort, the Authority knows you all are doing great things at your organizations. It is requested that providers bring back information to this meeting to share with the Authority to utilize a "Best Practice" protocol. Tania suggested that the providers give a 10 – 15 minute presentation discussing "Best Practices" at your organizations. Tania asked the group to submit their presentation via email to tgreason@dwmha.com two weeks prior to the next schedule meeting. 		
Action Items	Assigned To	Deadline
Tania will sent out a reminder to providers via email two week prior to the next meeting in April 2019.		

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4) Item: DWMHA Quality Operation Website – Tania Greason

Goal: Information for QI Meeting Website

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

NCQA Standard(s)/Element #: X QI #2

CC# UM # CR # RR #

Discussion/Decisions Made		
 Tania informed the committee members that the Quality Improvement (QI) unit has created a Quality Operations Link on our DWMHA website. Tania provided a demonstration as to how to access the QI site, also QI has added a link to the MDHHS website that would assist with questions, FAQ's for the HCBS (Final Rule) April stated in addition to all the resources and materials, surveys, frequent asked questions, memorandums, transition plans, compliance plans, and readiness tools for the Final Rule also be found on the MDHHS website link. FAQ's include answers and questions about lockable doors, visiting hours, choice of provider, and freedom of movement. In addition, information is provided regarding MDHHS's collaboration with LARA on these requirements. 		
Action Items	Assigned To	Deadline
None Required		

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5) Item DHHS Out-Station Updates – Seven Ogundipe

aoai: information for DHHS Out-Station Opdates			
Strategic Plan Pillar(s): Advocacy X Access Customer/Member Experience Finance Information Sys	stems 🗆 Quality 🗆 Workforce		
NCQA Standard(s)/Element #: QI # CC# UM # CR # RR #			
<notes discussion="" on=""></notes>			
Discussion/Decisions Made			
 Steven provided the group with an update on the Department of Michigan Health and Human 			
Services DHHS out station. The goal is to make certain members continue to receive services			
without loss of their Medicaid benefits.			
• The Authority have added four additional caseworkers within Wayne County. A worker will be			
placed at Community Living Services (CLS) in their (Wayne office), Starfish Family Services, Team			
Wellness, the Guidance Center and there will be two caseworkers at DWMHA main office. DHHS			
will provide the computer systems because they are a state operation.			
 The services provided at specific locations will not have the same type of service (Please see handout). 			
 Steven will be sending out a formal communication to providers letting them know about the additions to the DHHS out-station operations. 			
 Providers can continue to submit Medicaid spenddown claims/documentation to the out-station located at DWMHA main office effective April 1, 2019. 			
In addition, Steven stated that DWMHA has been negotiating with DHHS for outstanding claims			
from October – December of 2018. DHHS has agreed to accept outstanding claims from the noted			
time. Providers must also submit proof/documentation of the original date the claim information			
was submitted to DHHS. DHHS will review the information to make a determination of approval.			
Action Items	Assigned To	Deadline	
If providers have outstanding payments for spenddown during those October – December 2018 please	Group	April 5 [,] 2019.	
send outstanding claims to Steven in an envelope (do not fax) and send it as "Outstanding Medical	'	•	
Spenddown" put you name under his name. Steven will call you to acknowledge he has received the claim			
and let you know when he will presents it to DHHS.			

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6) Items: Behavior Treatment Plan Quarterly Data Submission – Fareeha Nadeem **Goal: Behavior Treatment Plan** Strategic Plan Pillar(s): ☐ Advocacy ☐ Access ☐ Customer/Member Experience ☐ Finance ☐ Information Systems X Quality ☐ Workforce NCQA Standard(s)/Element #: X QI #2
CC# UM # CR # RR # RR # <Notes on discussion> **Discussion/Decisions Made** Fareeha informed the committee members that DWMHA has submitted letters to our provider network regarding members on Behavior Treatment Plans. Fareeha distributed a copy of the letter to the group for review. The letter detailed the requirements for timely submission of quarterly data sheets. Providers that have members on behavior treatment plans are required to submit monthly meeting minutes and notes to DWMHA as well as quarterly submission of data spreadsheets. DWMHA must submit all required documents to MDHHS timely. Fareeha asked the group to review the letter "Adherence to Standard for Behavior Treatment Plan Committee (FY 2018). The letter referenced is posted on our QI (Quality Operations Meeting) website. All questions should be addressed to Fareeha Nadeem via email. **Assigned To Deadline Action Items** None Required

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7) Item: Michigan Mission Based Performance Indicator Reporting – Brad Klemm Goal: Strategic Plan Pillar(s): ☐ Advocacy ☐ Access ☐ Customer/Member Experience ☐ Finance ☐ Information Systems X Quality ☐ Workforce

NCQA Standard(s)/Element #: X QI #2
CC# UM # CR # RR # RR #

<Notes on discussion>

Discussion/Decisions Made Brad Klemm informed the providers of the new process for collecting the MMBPI data. With the removal of the MCPN's the new process will require providers to enter data directly within MH WIN. The new process also had to involve reprograming of the PCE module system. QI did not want to distribute the information to the provider network without proper data validation. Brad apologized to the committee for the short notice and is requesting 10 business days to rectify any discrepancies with the performance indicator data. In addition Brad sent out a DRAFT excel spreadsheet to the provider network asking for any feedback that the providers may have and or any errors they may be identified. Brad is requesting providers to submit all questions to his attention via email at bklemm@dwmha.com. In the future, monthly reports similar to what the MCPNs submitted to each provider will be forwarded prior to the data due date. DWMHA submitted to each provider a draft plan-of-correction (POC) for review. Brad instructed the group to write down if they are having issues or concerns with not meeting the required MMBPI standards. Brad forwarded a screen shot of the excel spreadsheet to each of the providers. The POC's are being submitted to each provider to address the guidelines and requirements per MDHHS. Providers should review their provider systems even if the required standard has been met. Providers should review the process to address members that may have not received timely services i.e. appointments outside of the 7 day requirement. Organizations should review required standards to adhere to the requirements per MDHHS. Brad informed the committee members that MDHHS currently utilizes a company called Heath Service Advisory Group (HSAG). HSAG will be at DWMHA this summer to review our Quarter 1 – MMBPI data. HSAG will want to review processes to determine our systematic approach for members that currently do not meet the required standards. Brad also reminded the committee that members that are hospitalized must have a critical/sentinel event completed. Our QI team has noticed that there were some instances in which critical/sentinel events were not completed for members that were hospitalized.

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Action Items	Assigned To	Deadline
Brad asked the group if they would like to develop a work group for the DWMHA Performance Indicators	Group	On-going
and the first meeting will be held at DWMHA on April 2, 2019 from 2:00 pm – 4:00 pm		

Provider Questions/Comments

NEXT MEETING: Wednesday, April 17, 2019

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Detroit Wayne Mental Health Authority

707 W. Milwaukee St.

Detroit, MI 48202-2943

Phone: (313) 833-2500

March 6, 2019

Re: Adherence to Standard for Behavior Treatment Plan Review Committee (FY 18)

DWMHA Community Partners,

This correspondence is to inform you of noticed discrepancies in reporting of behavior treatment plan data to Detroit Wayne Mental Health Authority's Behavior Treatment Advisory Committee.

This announcement is only for DWMHA Provider Network who provide behavior treatment plan services to members and are part of Behavior Treatment Plan Review Committees (BTPRC) across DWMHA Provider Network.

Following the implementation of the DWMHA Systems Transformation on October 1, 2018, the DWMHA's Quality Improvement Unit also implemented an improved review process to better ensure contracted service providers are in compliance with the Standard for Behavior Treatment Plan Review Committee.

The breach of contractual obligations may result in sanctions.

DWMHA Network Providers with Behavior Treatment Plan Review Committees are required to submit behavior treatment plans data to DWMHA on quarterly basis.

This data shall minimally include:

- 1) Dates and numbers of interventions used
- 2) The settings (e.g., individual's home or work) where behaviors and interventions occurred
- 3) Observations about any events, settings, or factors that may have triggered the behavior.
- 4) Behaviors that initiated the techniques.
- 5) Documentation of the analysis performed to determine the cause of the behaviors that precipitated the intervention.
- 6) Description of positive behavioral supports used

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- 7) Behaviors that resulted in termination of the interventions.
- 8) Length of time of each intervention.
- 9) Staff development and training and supervisory guidance to reduce the use of these interventions.
- 10) Review and modification or development, if needed, of the individual's behavior plan.
- 11) All Critical/Sentinel events submitted as a result of Serious Challenging Behaviors, Inpatient Behavioral Hospitalizations, Injuries Requiring Hospitalization or ER/ED as a result of the behavior.

Quarterly submission due dates for Behavior Treatment Plan Data Jan 15, Apr 15, July 15 and Oct 15.

If you have any questions regarding this notice, please send a detailed email to Fareeha Nadeem (fnadeem@dwmha.com), Clinical Specialist of Quality Improvement.

DWMHA is prepared and looking forward to managing the behavioral healthcare system in providing quality holistic care that is in the best interest of the people we serve. We cannot do this without our Community Partners.

Thanks for your cooperation.

Sincerely,

April L. Siebert.

Director of Quality Improvement

Michigan's Home and Community Based Services (HCBS) Transition Toolkit

Developed by MALA, MARO, and MACMHB Tool kit version as of: May 21, 2017

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This tool kit, developed by the Michigan Assisted Living Association (MALA), MARO, and the Michigan Association of Community Mental Health Boards (MACMHB), is designed to assist residential and non-residential providers, CMHs, and PIHPs in making the changes required by Michigan's Home and Community Based Services Transition plan.

Caveats in the use of this tool kit:

- 1. This tool kit captures the most relevant documents, related to Michigan's HCBS transition and a range of readiness tools for use by HCBS stakeholders. Note that some of the documents are still under development by MDHHS, CMS, LARA, or other parties. As these documents are finalized, they will be added to this tool kit which will be sent, as an updated tool kit, by MALA, MARO, and MACMHB to their members.
- 2. While the provision of direct links to the documents, listed below, was the preferred approach, it became clear that when the linked/referenced documents were updated, the links continued to direct the reader to the old not-update version. Hence, this tool links the reader to the relevant website with a clear delineation of the title of the appropriate resource on the first page of the site that is listed in this tool kit.
- 3. Where a resource is not available on-line, it is attached to this tool kit and so noted in the tool kit.

Over-arching foundational websites and documents

- 1. Michigan's HCBS Transition site: http://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html
- Michigan's HCBS Transition Plan: See "Revised Statewide Transition Plan" on MDHHS HCBS Transition website: http://www.michigan.gov/mdhhs/0,5885,7-339-71547_2943-334724-- ,00.html
- **3.** MDHHS Technical Guide: See **attached**: "MDHHS technical guide 3.17" (not available on line)

Person centered planning guidelines

4. 2017 PCP guidelines: (In development)

Notification letter to providers and corrective action plan template

- 5. Notification letter (In development)
- 6. Response/plan of correction form (that will be sent, by the PIHPs, to the CMHs for completion and submission to the PIHPs) (In development)

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Provider readiness tools (Note: These readiness tools were developed by stakeholder workgroups, specific to residential and non-residential services, in consultation with the HCBS Implementation Advisory Group (a group, made up of consumers, advocates, providers, and representatives and members of MALA, MARO, and MACMHB, formed by MDHHS to guide the Department in its HCBS transition efforts). The tools have been reviewed by the HCBS Transition Team, within the Michigan Department of Health and Human Services and are on the MDHHS HCBS Transition website.)

- 7. Non-residential readiness tool— See "HCBS Provider Readiness Tool Non- Residential Settings" on the MDHHS HCBS Transition websitehttp://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html
- 8. Residential services readiness tool: See "HCBS Provider Readiness Tool Residential Settings" on the MDHHS HCBS Transition website http://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html

Two additional resources related to residential services HCBS readiness: The Michigan Department of Health and Human Services and the Department of Licensing and Regulatory Affairs have received several questions about how the rule intersects with state licensing laws. The two Departments issued the following guidance to stakeholders to help address these issues:

9. MDHHS/LARA Joint Guidance Document to address issues related to licensing of Adult Foster Care (AFC) homes and Homes for the Aged (HFA) and to determine whether state licensing rules conflict with the characteristics outlined under the final rule. In particular, stakeholders have questioned whether the federal requirements conflict with state licensing requirements on the following issues. See "MDHHS/LARA Joint Guidance Document" on the MDHHS HCBS Transition websitehttp://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html

Note that this Joint Guidance Document is also contained within the HCBS Provider Residential Readiness Tool, described above.

10. Summary of Resident Rights related to discharge and complaints from residential settings See "Summary of Recipient Rights" on the MDHHS HCBS Transition websitehttp://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html

Heightened scrutiny process

11. Heightened scrutiny pages of transition plan (pages 112-120 in the "Revised Statewide Transition Plan" on MDHHS HCBS Transition website): http://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html

Consumer, family, and community educational resources

12. HCBS fact sheet (one page handout): See the" Home and Community Based Services Rule Factsheet" on MDHHS HCBS Transition website: http://www.michigan.gov/mdhhs/0,5885,7-339-71547 2943-334724--,00.html

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- 14. Powerpoint slides for use with families: See **attached**, "Family Final powerpoint slides.pdf" (not available on line)