

Quality Operations Technical Assistance Workgroup Meeting Agenda Wednesday, June 26, 2024 Via Zoom Link Platform 9:30 a.m. – 11:30 a.m.

۱.	Announcements	A. Siebert
II.	Substance Use Disorder (SUD)	J. Davis/G. Lindsey
III.	Recipient Rights	C. Witcher
IV.	DWIHN Policies	
	 Office of Recipient Rights Fingerprinting-Photographing-Audio Taping and Use of One-way Glass Personal Property And Search Recipient Rights Appeals Treatment with Dignity And Respect 	C. Witcher
V.	QAPIP Effectiveness	
	Quality Improvement	
	b) MDHHS HCBS Deliverables Updates	D. Dobija HCBS Team C. Sight-Mackey

VI. Adjournment



Quality Operations Technical Assistance Workgroup Meeting Agenda Wednesday, June 26, 2024 Via Zoom Link Platform 9:30 a.m. – 11:30 a.m. Note Taker: DeJa Jackson

1) Item: Announcements:

- The Board of Directors has accepted the resignation of DWIHN's CEO Mr. Eric Doeh.
- June 14th was the ceremony for the groundbreaking of the new DWIHN facility. The facility is expected to be built and up and running by 2026.
- DWIHN's 707 Crisis Center is officially open for business. A virtual tour of the crisis center is available on YouTube.
- Effective July 1st children providers and CCBHC providers are to begin using the H0002 CPT code when completing screenings to determine eligibility from behavioral health services.
- The Children department added another children provider, Judson Center.

2) Item: Substance Use Disorder (SUD) – G.Lindsey/ Judy Davis

Goal: Updates from SUD

Strategic Plan Pillar(s): Advocacy Access Customer/Member Experience Finance Information Systems Quality Workforce NCQA Standard(s)/Element #: QI CC# UM # CR # RR #

Discussion		
 Gregory Lindsey and Davon Jones shared the following SUD updates: Providers are to be on the lookout for emails from SUD regarding Discharges and SUD's performance indicators data requests. SUD is having their 10th Annual Wellness Beyond the Walls Conference on Thursday, July 18th from 9am-4pm located at Fellowship Chapel in Detroit. 		
 The Opioid Summit is August 22nd located in Livonia at Livonia Manor from 8am-4:30pm. The registration is \$40. 		
Provider Feedback	Assigned To	Deadline
No additional provider feedback was provided.		
Action Items	Assigned To	Deadline
None required.		



3) Item: Recipient Rights – Chad Witcher

Goal: Updates from ORR

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

NCQA Standard(s)/Element #: QI 🗆 CC# 🗆 UM # 🗆 CR # 🗠 RR #		
Discussion		
Chad Witcher shared the following ORR updates:		
• June 28 th ORR Manager Robert Gilreath is retiring, we wish Mr. Gilreath well with his retirement.		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		
Action Items	Assigned To	Deadline
None required.		



4) Item: DWIHN Policies Goal: Office of Recipient Rights

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

NCQA Standard(s)/Element #: QI □ CC# □ UM # □CR # □ RR #		
Discussion		
Chad Witcher shared the following updates for the Office of Recipient Rights		
After the review from MDHHS, minor changes were made in some of the Office of Recipient		
Rights policies which include the following:		
 Fingerprinting-Photographing-Audio Taping and Use of One-way Glass 		
 Personal Property And Search 		
 Recipient Rights Appeals 		
 Treatment with Dignity And Respect 		
Updated RR Polices/Procedures are available on DWIHN's website for further review.		
Provider Feedback	Assigned To	Deadline
	Assigned to	Deduinie
Questions:		
• We have in our PCE system a new option to add a photograph of our consumers. What is the stance of rights on that? Can you discuss that? And would we need special permission to do		
that?		
Answers: (Chad Witcher)		
• No, it's actually part of the medical record. Putting it in there, it's protected, people would not be		
able to access the picture without appropriate permissions, so I don't think that would be an		
issue.		
Action Items	Assigned To	Deadline
None Required.		



5) Item: QAPIP Effectiveness – Quality Improvement Goal: MDHHS Waiver & iSPA Review Updates

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

NCQA Standard(s)/Element #: QI 1 CC# ___ UM #___ UCR # ___ RR # ___

Discussion		
Danielle Dobija, QI Administrator, provided the following updates to the workgroup:		
 MDHHS Waiver & iSPA Review: There was a need for a corrective action plan, and the corrective action plan was submitted to MDHHS on last Friday. Currently waiting for a response from MDHHS to see if the plan will be accepted as is or if there will be additional revision requests to the plan. A notice to the providers will be sent out once the plan is approved. If not approved additional instructions that we receive from the state will be shared with the providers. It has been confirmed that MDHHS's intention to complete the waiver and ISPA review with all 10 PIHPs every year instead or every two years. 		
Provider Feedback	Assigned To	Deadline
No provider feedback.		
Action Items	Assigned To	Deadline
None required.		



5) Item: QAPIP Effectiveness – Quality Improvement Goal: MDHHS HCBS Deliverables Updates

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

NCQA Standard(s)/Element #: QI
CC# 🗆 UM # □CR # 🗆 RR # Discussion Danielle Dobija, QI Administrator shared the following updates: **MDHHS HCBS Deliverables:** • There was a MDHHS HCBS survey that was developed and issued by the state. The HCBS survey is intended for residential providers only. The survey was opened on June 5th and is scheduled to close on July 8th. • Completion of the survey by our providers is required in order to continue receiving Medicaid ٠ funding. The purpose of the survey is for the state to be able to develop an inventory of all of the • residential settings across that state of Michigan, providing specific HCBS Medicaid funded services and identify the features of each of the settings. The centers for Medicare and Medicaid are completing an HCBS review with MDHHS the week of ٠ July 15th. **Provider Feedback Assigned To** Deadline No Provider feedback. **Assigned To Action Items** Deadline None required.



5) Item: QAPIP Effectiveness – Quality Improvement Goal: CE/SE Updates

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

NCQA Standard(s)/Element #: QI 1 CC# 0 UM # 0 CR # RR #		
Discussion		
Carla Spight-Mackey, Clinical Specialist QI, shared the following updates for CE/SE reporting and		
processing:		
Train the Trainer		
 Available to the larger providers on August 18th from 9am-12pm 		
Care Academy		
• Staff that were involved in the incident report for a CE, will be enrolled in Care Academy.		
 Once enrolled in the Care Academy training it is time framed for completion. You will 		
receive a certificate of training and completion from the Care Academy.		
 Incident Report Uploads for CE/SE's 		
 When entering the Critical/Sentinel events, also upload the incident report connected to 		
that Critical/Sentinel Events		
Provider Feedback	Assigned To	Deadline
No Provider feedback.		
Action Items	Assigned To	Deadline
None required.		

New Business Next Meeting: 08/28/24 Adjournment: 6/26/2024