

Meeting Date: March 18, 2019

MSHN/CMHSP Representatives:

In Person: Kim Cereske (BABH), Julie Rookard (CMHCM), Lynn Charing (GIHN), Tim Ninemire (SCCMHA), Brooke Maylee (SCCMHA), Dirk Love (SHW), Cece McIntyre (MCN), and Dan Dedloff (MSHN)

By Phone: Raquel Sparkman (CEI), Amy Kurtti (Newaygo) Carly Coxon (LifeWays), Shannon Clevenger (LifeWays) and Liz Thelen (The Right Door)

KEY DISCUSSION TOPICS

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| <ul style="list-style-type: none"> • Welcome and Introductions • Review and approve February 11, 2019 meeting minutes <ul style="list-style-type: none"> ○ Review follow-up action items • Review and approve current agenda • FY18 Q3-4 Denial, Grievance, Appeals, and Second Opinion Report • FY19 Denial, Grievance, Appeals, and Second Opinion Report Revisions • FY18 Q3-4 Fair Hearing Report • FY19-20 MSHN Balanced Scorecard | <ul style="list-style-type: none"> • Proposed CMS Medicaid Customer Service • Changes Regional LEP Language Service Provider • Standardization of Educational Material/ Brochures/ Forms Across the Region <ul style="list-style-type: none"> ○ Standardized Grievance Submission Form ○ Adverse Benefit Determination-Revised ○ Notice of Appeal Receipt- Revised • Open Discussion • Future Agenda Items • Updates • Next Meeting |
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KEY DECISIONS

- Welcome and Introductions
- The CSC members approved the February 11, 2019 meeting minutes.
- Review follow-up action items –
 - The majority of CMHSPs have received their FY19 Handbook from Ray Printing.
- The CSC members approved the current agenda.
- The FY18 Q3-4 Denial, Grievance, Appeals, and Second Opinion Report was reviewed. Performance for Indictors 1a, 2a, 3a, and 4a has declined and ten out of 12 CMHSPs will be required to submit a Corrective Action Plan (CAP).
- Members explored and agreed upon revisions for FY19 to the Denial, Grievance, Appeals, and Second Opinion report.
- The FY18 Q3-4 Fair Hearing Report was reviewed and approved as written.
- The revised FY19-20 MSHN Balanced Scorecard was reviewed and the addition of the Grievance, Appeals, and Second Opinion Indicators 2a, 3a, and 4a were noted.
- The proposed CMS Medicaid Customer Service rule changes were reviewed and discussed.
- After discussion, the members voted to discontinue the plan for a regional LEP language service provider.
- Standardization of Educational Material/Brochures/Forms Across the Region
 - The draft of the standardized Grievance Submission form was reviewed, revised, and approved for use.
 - The revised language for the Adverse Benefit Determination and the Notice of Appeal Receipt was review. The revised templates were approved as written.
- Open Discussion:
 - Brief discussion regarding what information was entered into a consumer’s record for a Customer Service contact
- Future Agenda items
 - Contract Amendment #2 Customer Service changes.

ACTION/INPUT REQUIRED

- The Denial, Grievance, Appeals, and Second Opinion report CAP template will be emailed and is due to MSHN May 3rd.

KEY DATA POINTS/DATES

- ✓ Next CSC meeting: Monday, April 15, 2019 at GIHN from 9:30am to 11:30am. Call-in capability provided.