

Meeting Date: 8/26/2021

***Zoom Attendance**

- MSHN – Sandy Gettel*
- Bay Arenac –Sarah Holsinger*
- CEI – Elise Magen*
- Central –Kara *
- Gratiot – Taylor Hirschman*
- Huron – Levi Zagorski*
- Lifeways –PJ Hoffman*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw-Holli McGeshick*
- Shiawassee –Becky Caperton*
- Tuscola – Jackie Shillinger*
- The Right Door- Susan Richards*

Guests

- CEI – Bradley Allen*
- CEI – Shaina Mckinnon*
- CEI – Tonya Seely*
- The Right Door –Jill Carter*
- MSHN SUD – (quarterly)
- GIHN Sarah Bowman
- MCN Joe Cappon
- BABH Lisa Nagal
- Lifeways –Jennifer Wireman*
- SCCMH-Bo Zwingman-Dole
- TBHS- Lindsay Harper
- MSHN-Amanda Ittner

KEY DISCUSSION TOPICS

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| <ul style="list-style-type: none"> 1) Welcome and introductions- 2) Review & Approvals <ul style="list-style-type: none"> a. Meeting Minutes/Agenda b. Review follow up action items 3) Performance Improvement Projects <ul style="list-style-type: none"> a. Recovery Self-Assessment (September) b. Diabetes Monitoring 4) Performance Measure Updates <ul style="list-style-type: none"> a. BTPR FY21Q3 5) Project Development <ul style="list-style-type: none"> a. Network Adequacy Plan b. Performance Improvement Topic FY22 c. Optional PIP d. Supplement Death Reporting - Finalize. RCA documents e. Veterans Data=Project Description Approve | <ul style="list-style-type: none"> f. MMBPIS Project Description Review- FAQ Approve FY22 g. BH-TEDS Specifications FYI 6) MDHHS/MSHN Updates <ul style="list-style-type: none"> a. MiCAL b. HSAG PMV-Preliminary Summary c. HSAG PIP d. HSAG Compliance Review e. MDHHS Follow up Review f. MDHHS QIC Updates g. Opioid Overdose Dashboard h. Outcomes Performance Measures Pilot |
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KEY DECISIONS

- 2) Review & Approvals
 - a. Meeting minutes for 7/22/2021 approved with no edits. No additions to the agenda.
 - b. MMBPIS corrective action is in need of completion and submission for the following CMHSPs: BABH, Lifeways, MCN, The Right Door by August 31..
- 3) Performance Improvement Projects
 - a. Recovery Self-Assessment- Analysis will completed for September meeting.
 - b. Diabetes Monitoring- EQR PIP Summary was resubmitted with 2020 HEDIS specifications. Waiting for Draft report to be received in September.
- 4) Performance Measure Updates
 - a. BTPR FY21Q3 Performance Summary-Goal 2 was approved by CLC and will be included in the BTPR Performance Summary.
- 5) Project Development
 - a. Network Adequacy Plan-QIC added action step to the work plan to include - Evaluate data; address discrepancies; clarification/consistency with state reporting. Refer any network adequacy issues to the Provider Network Management Committee for relevant follow up.
 - b. Performance Improvement Topic FY22 -3 options were explored. 2 of the 3 demonstrated a disparity. Data for Penetration Report and the MMBPIS Indicator 10 was reviewed. Plan Cause Readmission did not demonstrate any disparities. CMHSPs should review the MMBPIS Ind. 10 and the MSHN Penetration Rate and prepare to finalize topic in September.
 - c. Optional PIP-HSAG is recommending a topic to include the MMPIS Indicator 2 or 3. This can be used as the optional PIP-Design of the new PIP will occur in the next few months.
 - d. Supplement Death Reporting -Supplement data collection finalized and approved with the addition of * to indicate required fields for completion when drug related and deaths where COVID is a contributing factor are submitted. Supplement data collection includes covid as a contributing factor (until 9/30/2021) and drug related deaths, the number of sentinel events per quarter, and the specific information required when an event meets criteria for immediate reporting to MDHHS. Shared document file for RCA has been moved to the QIC meeting packet folder .

	<ul style="list-style-type: none"> e. Veterans Data-Project Description to address the Narrative submissions and the BSC measures of Increasing access and service utilization for those that identify as a veteran was finalized and approved. Follow up discussion related to the expected timeframe for the VSN response to the consumer. QIC agreed to 2 weeks from the receipt of the referral. referrals should be held at this time until MSHN has filled the VSN position. f. MMBPIS Project Description Review-FAQ New questions included to clarify those who withdraw from services prior to the first service, and those referred by another county. The MMBPIS Project Description was reviewed and approved. Changes include additional reasons under the required documentation, and the addition of validations to the CMHSP upload file. g. BH-TEDS Specifications -New updated version will be coming. QIC will review next month to address any relevant training. <p>6) MDHHS/MSHN Updates</p> <ul style="list-style-type: none"> • MDHHS QIC- Demonstrated the location of the meeting documents on the MDHHS website. Link is included in the agenda. • Waiting for HSAG draft reports for the PMV and the Compliance Review. • No other updates.
<p>ACTION STEPS</p>	<ul style="list-style-type: none"> • CMHSPs-Submit MMBPIS CAP as indicated above. • MSHN/SG to follow up with MDHHS related to critical incidents/unexpected deaths. • CMHSP to review PIP options and prepare to finalize in September. • Finalized copies of documents will be located in the QIC Meeting Folder for 8_26_2021 by next Tuesday.
<p>KEY DATA INTS/DATES</p>	<ul style="list-style-type: none"> • QIC-September 23 • Data Analytics September 8