MSHN
Mid-State Health Network

Date: November 16, 2022

ITC Attendees
- ☒ **MSHN - Joe Wager**
- ☒ **Bay – Jesse Bellinger**
- ☒ **CEI – Joanne Holland**
- ☒ **Central – Martin Slominis**
- ☒ **Gratiot – Brian McNeil**
- ☒ **Huron - Shannon Wichert**
- ☒ **Lifeways – Alexis Shapiro**
- ☒ **Montcalm – Terry Reihl**
- ☒ **Newaygo – Jay Hollinger**
- ☒ **Saginaw – Amy Lou Douglas**
- ☒ **Shiawassee – Kyle Aubrey**
- ☒ **Right Door – Nathan Derusha**
- ☒ **Tuscola – Stacey Dudewicz**
- ☒ **MSHN – Ron Meyer**
- ☒ **MSHN – Shyam Marar**
- ☒ **Bay – Theresa Adler**
- ☒ **Central – Jane Cole**
- ☒ **Central – Kevin Faught**
- ☒ **Right Door – Jill Carter**

KEY DISCUSSION TOPICS

- Approval of snapshot from October 2022
- MDHHS Communication review
- HSAG Compliance Reviews – final report available
- BH TEDS and Encounter submission status
- QAPIP Committee Council Annual Report
- Videos being sent to therapists
- Balanced Scorecard review
- T1-T2 report
- CIO forum update
- Decommissioning the WSA for Autism
- Other
- ITC meeting for December will be Zoom call
- CCBHC IT subgroup
  - o DCO issues with onboarding.
  - o Mild/Moderate clinical definition.
  - o Mild/Moderate identification (in encounters).

✓ KEY DECISIONS

October 20, 2022 minutes approved. Any changes, please send to
steve.grulke@midstatehealthnetwork.org

- MDHHS communications? None

- HSAG Compliance Reviews – final report from HSAG available in Box.

- BH TEDS and Encounter submission.
  FY23 has been going through without systematic issues.
  COB is passing through without issue for PCE's – CEI has a rejected file. They're
  doing a full COB loop, not just fee for service. CEI admits that it may be on their end.

LifeWays is noticing an increase in errors. but there are more errors than not.
Shyam will verify with Dmitriy whether edits were sent on.
NPI issues appear to be no longer warnings, but full-on errors.
Shyam will confirm if this is both accurate and a new state requirement.
Milliman is running tests on EQI reports. The formal deadline remains February.

- QAPIP Committee Council Annual Report – Completed. A copy is in Box. Reach out to Steve if anything needs fixing.
- Videos being sent to therapists
  CEI reports that a family is trying to capture behavior in their kid/client/consumer, then texting it to the clinician. We have advised staff from a security point that if therapists receive a video via text that they should delete it and indicate it was sent, that they didn't view it, and that they offer to review it at their next session or during telehealth, but that it occurs in a HIPAA-secure manner. And that the video is not stored at all. CEI staff has the option of a company 'flip-phone,' or the use of their own phone with a stipend and an agreement that they sign. It's on staff to manage how they're communicating with their consumers, and many provide their numbers to them. Teams was suggested as an option. Google Voice is non-HIPAA compliant and is discouraged.

- Balanced Scorecard review.
- T1-T2 report
  Joanne will check with Steve regarding its continued use. It is no longer being requested by HSAG, but only takes two minutes to run.
- CIO forum draft minutes for September will be put in the Box folder.
  10/22 notes have been posted. As the IO conference is 12/1-2, CIO Forum will be in person 2-4 on 11/30.
  COB workgroup has a FY23 kickoff meeting, then 2nd Tuesday of each month starting 12/9. An invitation should have been received.
  EQI was 11/10. Milliman's first draft raised some questions about a redundant field in non-encounterable cost. It's an error and should only be on direct run side. No TEDS updates and no questions.
- Other – Decommissioning the WSA for Autism reporting. This will go live in April.
  The following explanation was provided for removing the Autism Waiver from the WSA:

Apparently the WSA is responsible for collecting certain info in autism that the state needed to report to the feds. Most of that information is no longer necessary, so that is why they are decommissioning it, as well as to make room for the 1915i. Additionally: "The WSA has had challenges related to receipt processing and availability. Some data is not as relevant. They are also not required to provide ADA oversight. Those requirements are eliminated in fy23 budget language."
As of this meeting, updated requirements to reflect this had not yet been provided.

Reconsidering the schedule and revisiting the April/November semi-annual in person.

CCBHC IT Subgroup

- CCBHCs are still struggling with onboarding of DCOs, primarily EHR setup. Qualifying services and other services currently require separate entry methods.
  We are hoping all the SALS in that record. When we filter through for the t1040 bundling package, it will grab the SALS that are CCBHC and our providers won't have to switch. We still need to make sure they're operating under the DCO. It's just a mess.

  Joanne has a weekly DCO readiness meeting. Every time we meet, we uncover more issues.

  Richard Carpenter pulled together CCBHC finance officers; they pulled in some SMEs for mild/moderate population identification.

  Two initiatives:
  1: ISK will lead a clinical group for a mild/moderate definition across the state.
  2: A data workgroup to try to identify within the encounter file the mild/mod population.

  Joanne is leading it and will meet on Monday 11/19. Steve is also a part of it. We have ideas that do not include modifiers. It is assumed that at some point the State will want to be able to do this via encounters. Provided that there is one claim per service entered in PCE, we could put it at the service line level. If that is restrictive, where can we put it at the claim line level. If there are multiples, the state would need to know which ones are mild/moderate.

	The other thing agreed to is that a CMH's logic can be unique to your EMR. How you get it in to your encounter is up to you. We will meet again mid-December with Richard.
✓ **ACTION/INPUT REQUIRED**	• None
✓ **KEY DATA POINTS/DATES**	• Next ITC Meeting: December 14, 2022 Zoom only • Next CIO forum meeting: November 30, 2022 2 – 4 pm before IO Conference.