

REGIONAL OPERATIONS COUNCIL/CEO MEETING

Key Decisions and Required Action Date: November 20, 2023

Members Present: Chris Pinter; Lindsey Hull; Maribeth Leonard; Carol Mills; Julie Majeske; Tracey Dore; Tammy Warner; Kerry Possehn; Michelle

Stillwagon; Bryan Krogman; Sara Lurie

Members Absent: Sandy Lindsey;

MSHN Staff Present: Joseph Sedlock; Amanda Ittner; For applicable areas: Leslie Thomas, Todd Lewicki, Skye Pletcher, Amy Dillion

Agenda Item		Actio	n Required			
Consent Agenda	Reviewed and approved items, including charters					
	Approved and received	By Who	N/A	By When	N/A	
FY 23 Interim Results of Operations; Impacts on FY 24	L. Thomas reviewed the FY23 Interim Financial results. FY23 Year-End has zero savings and slightly less than fully funded ISF. Estimated impact of CCBHC reported around \$20m. The capitation vs. supplemental will incur some changes in FY24. Consideration for new initiatives (i.e. inpatient tiered rates) and their impact must be analyzed as well. Discussion regarding the amount of local earned from CCBHC and the reimbursement portion from Medicaid capitation. FY24 Estimates a \$2M deficit.					
	Discussed continued advocacy on the Medicaid Revenue as well as the Medicaid capitation portion of the CCBHC rate.	By Who	J. Sedlock/L. Thomas	By When	Ongoing	
Delegated Managed Care Site Review Process Updates	CMHSPs to address cost containment strategies. A. Dillon reviewed the proposed changes to the delegated managed care site review process for CMHSPs. The major change from every other year to every three years, using a fiscal year and also using the MDHHS review/charts to support the DMC review/chart selection.					
	Approved as presented	By Who	A.Ittner	By When		
In-Region COFR Recommendations	S. Pletcher reviewed the follow up recommendations by CLC/UM regarding the transition of care policies for COFR. FY24 - Each CMHSP will work to terminate existing "long-term" COFRs for individuals who are stable in placemen and services for 12 months or greater. Formation of a time-limited workgroup (meet 2-3 times total) to develop policy/procedural guidance which addresses the identified concerns. FY25 - Full implementation of new policy/procedure, phase out remaining existing COFRs, agreement not to develop new in region COFRs going forward. Ops members voiced concern of "purchase of service' differentiation, "paying for a placement outside of their catchment area". COFR's is a different situation. Next step is that policy and procedure needs to clarify and					

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Agenda Item	Action Required					
	have clear definitions. CMHSPs will look at COFR's only to phase out. Time limited workgroup to include Clinical, UM and Finance staff.					
	Ops approved for workgroup to form, bring pack policy/procedure then proceed with phase out of COFR.	By Who	S. Pletcher	By When	1.2024	
Provider Network Adequacy Standards Update	A. Ittner reviewed the Network Adequacy proposed county categories, status of negotiations with MDHHS and the status of the FY23 NAA now due April 30. More information will be shared as the draft new standards are received. Ops will receive the FY23 NAA for MSHN in January/February.					
	Informational only	By Who	N/A	By When	N/A	
CMHSP Certification Reviews	A. Ittner requested clarification of process. MSHN has been copied on the review, questions for assurance but not in the initial process. Insurance issue regarding professional, workman's comp, for small providers. Significant CRM issues noted to certification process. Recertification is occurring now for the majority of CMHs as it was on hold during COVID.					
	MSHN will meet with MDHHS to discuss the certification process, review documents and how MSHN can use the documents for DMC as well as clarify the role of PIHP with MDHHS.	By Who	A. Ittner	By When	1.2024	
Health Plan Rebid	J. Sedlock reviewed the MHP rebid document noting good collaboration with PIHPs/CMHS and additional focus on Children in Foster Care.					
	Informational Only	By Who	N/A	By When	N/A	
Conflict Free Access and Planning Update	J. Sedlock reviewed that update presented to the PIHP group from MDHHS indicating they will be announcing a decision sometime at the end of December/middle of January. The workgroup's last meeting is at the end November. Once MDHHS announces design, PIHPs will then be required to develop a regional implementation plan.					
	Discussion only – Topic for December/January	By Who	J. Sedlock	By When	1.2024	
myStrength/Protocall	MSHN received FOIA for myStrength which has now switched owners to Protocall. CMHCM noted a FOIA request as well. MSHN had only a few documents to submit.					
	Informational only	By Who	N/A	By When	N/A	
Autism Financing	M. Stillwagon requested CFO's take another review of how the Autism Finance is distributed. L. Thomas explained the Autism revenue is just an upfront payment based on enrollees, but the revenue is considered Medicaid and cost settled all together. Cash flow would be a consideration.					

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	Autism Fee Screens determined by MDHHS and capped the amount in actuarial analysis.						
	Finance Council will review again and bring back options to	Ву	L. Thomas	Ву	2.1.24		
	Ops Council	Who		When			
	T. Lewicki reviewed that Youth/Adults that are ready to be	T. Lewicki reviewed that Youth/Adults that are ready to be discharged from State hospital setting but still needing					
PRTF/ICTS	intense services (residential treatment), not placement, time limited up to 180 days but initial 90 days, IPOS						
	reviewed every 30days.						
	Youth: Pine Rest, Vista Maire and Hope Network	Youth: Pine Rest, Vista Maire and Hope Network					
	Adult: Hope Network, Beacon and Turning Leaf						
	PIHP required to have involvement.						
	Unsure yet how the payment responsibility will work; MSHN is seeking clarification						
	NCMH concerned about state placement for non-Medicaid and requirement for residential placement.						
	Discussion Only	Ву	N/A	Ву	N/A		
		Who		When			
Health Home Plan Monitoring Procedure	S.Pletcher reviewed the revisions to the procedure as requested by the BHH collaboration workgroup that						
	provides for both options of which the HH can select direct upload to WSA or allow auditor access by MSHN staff						
	The procedure also includes clarification of the assessment elements needed.						
	Ops Council approves the procedure as presented	Ву	S. Pletcher	Ву	N/A		
		Who		When			