

**MHA/ValueOptions® Maryland
Provider Quality Committee Meeting Minutes**

**ValueOptions® Maryland
1099 Winterson Road, Suite 200
Linthicum, MD 21090
Friday, July 8, 2011
10:00 am to 11:30 am**

In attendance: Mary Mastrandrea, Daryl Plevy, Karl Steinkraus, Donna Shipp, Dr. Helen Lann, Jarrell Pipkin, Michael Schorr, Colin Rhoades, Shontae Harrell, Jamie Miller, Terry Brown, Maryann SerinaMaryann Ceglar, Catherine Gray, Mike Drummond, and Herb Cromwell. **Telephonically:** Mark Greenberg, Carrie Morgan, Shajuan Forsey, Dawn Beckett, Lynn Testa, Guy Lason, Susan Wiloff, Jamie Collins, Darlene Wehn, Terry Norez, Melissa Schober, Andrene Jackson, Toni Williams, Mary Brassard, Toya Jackson, and JR Hughes.

| Topics & Discussion | Follow-Up Actions |
|--|-------------------|
| <p>Review and approval of Draft Minutes</p> <ul style="list-style-type: none"> June Minutes were not available for review. | |
| MHA/ValueOptions® Maryland Announcements | |
| <p>MHA UPDATE – Daryl Plevy:</p> <ul style="list-style-type: none"> Update on Approval for Telemental Health: Per Melissa Schober, ValueOptions sent out a Provider Alert with the application attached, and M. Schober will be collecting those applications via email. <p>ValueOptions® Update –</p> <ul style="list-style-type: none"> HIPAA 5010 Update: Per Michael Schorr, 3rd Quarter test plans are being finalized and FAQs are being updated. Once the FAQs are updated VO will sent out a Provider Alert. Update on Provider Access to Auth Letters: Per Colin Rhoades, VO sent out a Provider Alert in response to concerns from some providers who have been having difficulties viewing their authorization letters on specific consumers. The VO IT Department has updated the some features within the ProviderConnect System, and has regenerated the authorizations letters that were problematic. There is two part issue with this so provider are advised to read the Provider Alert. This new feature update will be available after Wednesday, July 13, 2011. | |

Provider Issues

- **Clarification on draft folder reminders and email notification for discharged authorizations:** Per Mary Mastrandrea, this currently is not a functionality and providers will not receive an email notification alerting them of a discharge.
- **Updates on Age 65+ and no Medicare:** Herb Cromwell provided four example cases for review. Daryl Plevy had Barbara Frances review the issue and she referred her to Susan Tucker (Medicaid) for further clarification. D. Plevy is pending a response from S. Tucker. M. Mastrandrea also asked H. Cromwell to send her citations from the CMS website in which he is referring to help speed up the clarification process to getting this issue resolved.
- **Status of the PRP Rate Changes:** Per Melissa Schober, MHA will meet Susan Tucker (Medicaid) to discuss the State Plan Amendment 1915I , and she will have more details on what Medicaid thinks of the proposed rate changes.
- **Updates on OMS (such as Availability Of Provider-Specific T2 Over T1) Reports:** MHA and VO is working diligently on the OMS Datamart, and expects the public site to go live in late August.
- **Issues with Accessing Pharmacy Data:** Per Micheal Schorr, each provider who tries to access this report will need an additional log-in with IntelligenceConnect, and it will mirror your ProviderConnect log-in and password. Once both are set-up it should be a seamless jump to the report section of ProviderConnect to IntelligenceConnect. Those who do not have access should email IntelligenceConnect@valueoptions.com to request access.
- **Status of Provider "Renewal Applications" in regards to the recent memo requiring submission of the IRS Form 990s:** Letters were sent out to providers in June with a form attached that needs to be completed and returned to the Office of Health Care Quality (OHCQ).
- **Issues of an Apparent Disconnect between VO's Clinical Criteria for Case Management vs. COMAR:** Per Jamie Miller, VO had carried over language from the previous Medical Necessity Criteria that included the word "and" instead of "or" which made a big difference and became problematic. The Medical Necessity Criteria has been edited, and the revised version is posted online.
- **Updates on the Mobile Treatment Criteria:** Per Jamie Miller, VO and MHA have agreed on the final language, and it will be posted to the website once the approval process is complete.

Daryl Plevy will follow-up with Susan Tucker for answers to resolve this issue.

MHA is meeting with Susan Tucker, and will report any changes.

- **Explanation of One-Day Delay in Electronic Payment:** Per Mary Mastrandrea, the last one-day electronic payment delay was 100% VO's fault. VO's vendor did not pull down the file in time to make the check run. This is the first time that VO is the root cause for the delay in payment, and VO has taken corrective action with the vendor to ensure that it does not happen again.
- **Update on Uninsured Eligibility Memo sent out on 4/18/11:** MHA has revised the memo and it was sent out last Friday, June 10, 2011. This memo addresses majority of the issues that were expressed at last month's meeting, and the only issue this memo did not address was "what to do you do if you provide crisis services or if you are treating a consumer in crisis and they are unable to provide documentation at the time of treatment." MHA is looking at various options to address the issue.

The next Provider Committee meeting is scheduled for Friday, August 12, 2011 10 a.m.
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