

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

**ValueOptions® Maryland
1099 Winterson Road, Suite 200
Linthicum, MD 21090
Friday, July 13, 2012
10:00 am to 11:30 am**

In attendance: Marc Reiner, Daryl Plevy, Jenny Howes, Vanessa Zimmerman, Shontae Harrell, Brian Johnson, Donna Shipp, Herb Cromwell, Steve Reeder, Jim Chambers, Sudha Sarode, Terry Brown, Adam Faill, and Elma Alston **Telephonically:** Shajuan Forsey, Andrene Jackson, Dawn Beckett, Darlene Wehn, JR Hughes, Maryanne Siegler, Jamie Miller, and Melissa Schober.

Topics & Discussion	Follow-Up Actions
<p>Review and approval of Draft Minutes</p> <ul style="list-style-type: none"> • May minutes were approved 	
MHA/ValueOptions® Maryland Announcements	
<p>MHA UPDATE– None</p> <p>ValueOptions® Update— None</p>	
Provider Issues	
<ul style="list-style-type: none"> ❖ Can providers get a copy of the July 1st rates asap so they can program their systems? – Herb Cromwell: Marc stated that these are loaded and would like to do a check run first. This should be posted on the website on Monday or Tuesday. ❖ Any MHA/VO updates on 1) Agencies losing billings because of eligibility-related auth changes which they have no way of knowing about and over which they have no control. Agencies continue to report claims retractions, often many months after duly authorized service delivery and payment, because of some eligibility edit Medicaid did. The request is that MHA pay these claims under the long-standing no-fault-of-the-provider principle: and 2) A non-legal guardian parent requesting a change in providers resulting in the original provider losing 	

billing after delivering bona fide services – how does VO decide who can change an auth? – Herb Cromwell: These go directly to Daryl for review. As far as the non-legal guardian issue Daryl and Jamie will set up a meeting with the provider.

- ❖ **When will providers be able to access all the service data reports that MHA and the CSAs get, including hospital and ED admissions? – Herb Cromwell:** Marc stated as part of the new QULP program, IP and ED reports are ready to go into testing. MHA is making a decision on the ALOS report and a 30 day readmission rate report. There are more management tools coming in the future.

- ❖ **Can provider agencies get copies of the EOBs VO sends every 6 months to service recipients? This info would provide them with accurate claims data that would allow them to know when their consumers received services (like ED or inpatient admission) outside the agency. Recipients don't always report such events to agency staff. – Herb Cromwell:** answered above

- ❖ **Any update on CBH's request to MHA re its instructions to VO re audits? On 3/14 CBH sent an email that said: "(A particular) agency should not have to do a PIP for a host of reasons including the sampling issue. I restate CBH's strenuous objections to VO acting as a licensing body and requiring plans of corrections on things like this – guidance/advice as per previous ASO protocols would be much more helpful, less punitive and more supportive of providers who are trying to do the right things. Additional issues related to VO audits: 1) At the CBH Compliance Committee today (7/10) several agencies reported that VO did an audit within days of an OHCQ visit and a Joint Commission visit. Aren't these things supposed to be coordinated? 2) An agency reported that the post-audit letter they received from VO directed them to contact MHA's Audrey Chase for more info and indicated that the next stage is an appeal before an ALJ. The agency wasn't offered the "case resolution" process with MHA. Why not? Is this still an option? – Herb Cromwell:** Daryl will look into the first issue about coordinating audit responsibilities with the OIG to avoid duplication of efforts. There may be an exception due to a complaint, but it wouldn't be considered an audit. On the second issue, Daryl stated they aren't routinely doing resolution

conferences anymore as they weren't changing the outcomes and were an administrative burden. If there is an instance with a significant issue then it may be done.

❖ **Did VO ever put out a memo on using the IntelligenceConnect report to access changed auths? Jamie did send info that CBH sent to its members but said a formal memo would go out. – Herb Cromwell:** Marc stated that the memo is ready to go out next week.

❖ **Auth questions: 1) When is auth responsibility for RRP being transitioned from the CSAs to VO? 2) Will RRP auth periods be 6 instead of 12 months? 3) Is MHA turning RCS auth responsibility over to the CSAs instead of VO and if so, what about the objections raised by RCS providers such as after-hours coverage, potential loss of VO ability to check eligibility, possible wait times in small CSAs with limited staff etc? If MHA goes ahead with this, can providers review protocols first? – Herb Cromwell:** Marc stated that VO is targeting the roll-out for August 1st to the 15th. There is a Care Manager in place already and everything is on track. Daryl stated the auth periods will be changed to 6 months for RRP. Daryl stated that they will not be turning over the RCS auth responsibility to the CSA's.

❖ **Any MHA update on the EHR-Compliance Workgroup? – Herb Cromwell:** This is still ongoing and there is another meeting scheduled.

❖ **Any QulP updates including how much incentive money will be available and where will it come from? – Herb Cromwell:** Final approval is still needed. The current plan is that incentive funds will come from savings on services when higher levels of care are reduced. The money will go to the providers that have reduced their expenditures on unnecessary or ineffective services

❖ **We lost power here in Bethesda last week, Friday through Thursday. This may impact our authorization submissions. It may not be an issue if clients weren't served, but we won't know the full extent for another week. We use an EHR so we have to wait until staff can enter services rendered into the**

system. Can there be exceptions made for this event in respect to authorizations and uninsured spans where needed? – Susan Wilkoff:

There is a protocol in place for this, and VO will back date auths as needed. There will be no penalties for anyone due to the adverse weather event.

**The next Provider Quality Committee Meeting is scheduled for:
Friday, August 10, 2012 10 a.m.
ValueOptions® Maryland
1099 Winterson Road
Linthicum, MD 21010**