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

ValueOptions® Maryland 1099 Winterson Road, Suite 200 Linthicum, MD 21090 Friday, November 2, 2012 10:00 am to 11:30 am

In attendance: Marc Reiner, Daryl Plevy, Karl Steinkraus, Mary Mastrandrea, Dr. Helen Lann, Bob Wells, Greg Burkhardt, Donna Shipp, Shontae Harrell, Vanessa Zimmerman, Jamie Miller, Jarrell Pipkin, Guy Reese, Jamar Khleif, Elizabeth Koontz, Sharon Crabbs, Carrie Medlin, Renee Hercules, Gerry McCanney, Cindy Pixton, Charmaine Herltz, Nicole Rayfield, Kimberly Harris-Coates, Joyce Worchesky, Tom Marshall, Terry Brown, Herb Cromwell, Oleg Tarkovsky, Cynthia Roberson, Jennifer Voorhaar, Jason Sutton, Shanna Bittner-Borell, Sean Lare, Andrea Galatis, Lavina Thompson, Penny Scrivens, Jim Chambers, Brian Johnson, Tammy Fox, Jenny Howes, Robert Canosa, Linda Lochner, and Joyce Bryant. Telephonically: Mark Greenberg, , Debra Liggins, Dawn Beckett, Michael Schorr, Abby Appelbaum, Eileen Hastings, Andrene Jackson, Joann Kubica, and Lisa Badie

Topics & Discussion	Follow-Up Actions
Review and approval of Draft Minutes  • September Minutes were approved.	
MHA/ValueOptions® Maryland Announcements	
MHA UPDATE-  • None	
ValueOptions® Update-	
<ul> <li>ICD-10 changes – This was covered in September's meeting. These changes have been pushed off till the year 2014.</li> <li>CPT Code changes – Marc Reiner stated that a draft of the grid has been submitted to MHA that is being reviewed. VO is working on making sure the transition will be smooth. Marc Reiner would like feedback from providers on their readiness. Dr. Lann stated that the Maryland Psychiatric Society is doing 5 trainings on these code changes. VO is working on documentation requirements with MHA per Dr. Lann.</li> <li>OMS and QuIP changes – Providers no longer need a quality plan in order to enroll in the QuIP program. Karl encourages providers to get their passwords for the OMS Datamart through</li> </ul>	

VO's Provider Relations department. **Provider Issues**  Status of MHA/VO work on readiness for the Jan 1 CPT coding changes. Changes will affect rates, service timeframes and combination of service rules. Will VO's claims system be adjusted in time? Even if VO can be ready, the new codes and time components could have a significant impact on OMHC reimbursement. In addition, more extensive documentation will be needed for certain doc provided services so there are compliance issues as well. - Herb Cromwell: See above under CPT code changes. On Oct 2 CBH contacted MHA, including Dr. Zachik, about whether providers doing the EBP TF-CBT with kids would have to continue to go through hoops to get more than 2 90846 auths (family psychotherapy without patient present). Rob Canosa had sent a rationale. - Herb Cromwell: Jamie stated you will need only to place one call to VO for further auths past the first two. Following the Oct 2 meeting at VO re PRP and RRP auths, MHA said it will allow uninsured spans for persons coming out of state hospitals into PRP? Is this for all PRP recipients or only this coming into RRPs? Will this be put into writing? - Herb Cromwell: Daryl stated that they will allow PRP and RRP for people coming out of state hospitals. There is a workgroup internally at MHA working on people getting their entitlements in order prior to going into the PRP or RRP, as this doesn't normally happen in a timely manner. There won't be anything put into writing until the SOAR program is finalized. Providers may hear that they will get a time limited auth to make sure all of the entitlements have been applied for. Daryl asked that providers make this a

priority to get the entitlements.

 Per an item from the Sept Provider Council meeting, VO IT was working with a couple providers on the problem of providers not being able to load authorizations electronically from VO download because the CSV files coming from VO are not consistent over time; anything that is set up stops working.

Status? – Herb Cromwell: Greg reached out to Spencer Gear but couldn't re-create the issue. Greg needs more examples from providers having this issue. In the meantime, it should be stable.

- How many OMHCs have now signed up for QuIP? Any update on what the nature/extent of incentives to providers might be? Herb Cromwell: So far 20 OMHC's have signed up. Daryl stated that this is a good opportunity within the community to test how this can work. We still don't have information on the exact dollar sharing or if it will be allowed. Herb will reach out to others for their input. Herb stated that they really need to know what the incentives will be.
- How many community providers have requested a log-in to obtain agency-specific OMS reports? Herb Cromwell: So far 22 have registered and we expect more to register after the QuIP/OMS meeting. Karl stated that the OMS glitches are being worked on with Mike Schorr. Karl asked if anyone has any problems with the OMS data to contact Provider Relations.
- The last PMHS quarterly data report posted on the MHA website is one dated Dec 2011. Are there more recent ones available? (Brian distributed 10/10/12 data at an Oct 15 MH Coalition meeting but don't see that posted anywhere.) Herb Cromwell: Daryl said the website is now up to date.
- What's the status of the health home language per Sec 2703 of the ACA for eventual submission to CMS? – Herb Cromwell: This is actively being worked on. There is a Medicaid workgroup with MHA that will come up with a draft. The draft is expected to be out soon. Medicaid staff are hoping to launch on April 1st.
- What's the status of the 1915i plan amendment for children that MHA and Medicaid have been working on for submission to CMS? – Herb Cromwell: This has been submitted to Maryland Medicaid. They are reviewing and doing the final edits. Their target for this is December.

The next Provider Quality Committee Meeting is scheduled for:
Friday, December 14, 2012 10 a.m.
ValueOptions® Maryland
1099 Winterson Road
Linthicum, MD 21010