

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

**ValueOptions® Maryland  
1099 Winterson Road, Suite 200  
Linthicum, MD 21090  
Friday, April 11, 2014  
10:00 am to 11:30 am**

**In attendance:** Daryl Plevy, Zereana Jess-Huff, Mike Drummond, Herb Cromwell, Greg Burkhardt, Tammy Fox, Jenny Howes, Marian Bland, Karl Steinkraus, Lori Mannino, Terry Brown, Sharon Jones and Patricia Adegbenle. **Telephonically:** Cynthia Role, Dawn Beckett, Melissa Wilcox, Jamie Miller, Sharon Oliver, Mary Brassard, Carol Jones and Donna Shipp

Topics & Discussion	Follow-Up Actions
<p><b>Review and approval of Draft Minutes</b></p> <ul style="list-style-type: none"> <li>January minutes were approved.</li> </ul>	
MHA/ValueOptions® Maryland Announcements	
<p><b>MHA UPDATE –</b></p> <ul style="list-style-type: none"> <li><b>Uninsured Documentation</b> Daryl stated that this was an audit issue. They provided them with a sample set of 25 uninsured cases to pull and we did not do well. She has not had the chance to go back and look but she estimated 17/25 cases had compliance issues. Mike Drummond volunteered to work with someone from MHA to come and see what our system is for collecting gray zone documentation that we keep on file to figure out what the response to the audit should be. Daryl reiterated that it is a documentation issue.</li> <li><b>House Bill 1510</b> Daryl stated that this is the integration and accreditation bill. It was passed with amendments from the MCO's. Those amendments were removing a statement that said, "that it is the intention of the state to move substance use services out of the MCO's and into the ASO and to manage behavioral health under an ASO." That statement was removed.</li> </ul> <p><b>ValueOptions® Update- None</b></p>	

## Provider Issues

- ❖ **What can MHA (BHA) say about the ASO RFP process (deadline was April 1<sup>st</sup> right?) Also, timeframes at this point for transitions.** Daryl responded that they cannot say anything except that the bids are in.
- ❖ **Salary surveys and cost reports – Including here in case access and form glitches are not resolved via April 9<sup>th</sup> phone meeting.** Jenny responded that the web based programs for the Salary Survey and Cost Reports are up and they sent out emails to all the providers with their username, password and instructions. As people continue to have issues they can email [dhmh.adultservices@maryland.gov](mailto:dhmh.adultservices@maryland.gov) and they will get back to you within 24 hours. For those who have not received usernames and passwords they can send an email and information will be looked up and forwarded to them.
- ❖ **ICD-10 delayed a year -- Implications? Recall, for example, an issue discussed several months ago about changes MD Medicaid is making/made to the CMS Form 1500 (was to be as of April 1<sup>st</sup>). What about DSM 5 timing? Need for crosswalks?** They have not gotten any definitive word from CMS as of yet so what ValueOptions is doing is moving forward with making structural changes. As far as DSM-5, that is still moving forward and we will be making the changes to our system in July.
- ❖ **Budget confirmed that the 4% inflationary rate adjustment will be effective January 1<sup>st</sup>, 2015. Will the 4% also apply to E/M code rates?** No it will not. It is a separate process that will be handled by Medicaid.
- ❖ **Will MHA allow use of E/M interactive complexity codes next FY?** Daryl stated that Brian is feeling like we have enough codes right now and is concerned about having too many of these codes because the physicians are getting paid the

way they should now.

- ❖ **MHA-ADAA merger bill passed with accreditation to replace most quality regs. Any plans by BHA on how/whether new accrediting bodies such as ACHC may be approved?** Daryl stated that we are still working on the regs and that we will be presenting the drafts soon. The new legislation allows the secretary to permit additional accrediting bodies but she suggests that providers not rely on what those additional bodies would be but go with a traditional one for now because there will need to be a whole review process.
- ❖ **Audits: What OIG-Medicaid audit processes are now underway affecting community behavioral health providers? We are hearing about ongoing ACA-related audits to verify that Medicaid providers in fact exist (although we will questions why providers have to provide contact information for their board member). Also, hearing about desk audits concerning agency compliance programs and how/whether staff is trained to comply with it as well as about behavioral health IT incentive money and whether the agency had met the required EHR provisions. Heard a new one about an HHS OIG audit related to use of HEDIS measures (applicable to out OMHCS?).** Daryl stated that CMS is requiring Medicaid to make the site visits.
- ❖ **An issue reported by OMHC's involves the medication peer reviews process for under age 18 consumers. The requirements are delaying or preventing some young service recipient's from obtaining certain EKG. Agency docs can call docs at the Peer Review entity to work through these issues and but one issue is the length of time it takes on the phone: a time a doc typically doesn't have to resolve such problems. CBH has written DHMH to request that PMHS prescribers who have 90+% of meds approved be exempt from the reviews.**
- ❖ **Clarification re: length of time to approve authorizations.** Daryl stated that the issue is when RRP's started approving authorizations, a lot of people don't get their information in until the end of the month when they have met their number of visits so there are chunks of time when ValueOptions Clinical Team gets flooded. Susan Wilkcoff suggested that the authorization requests be prioritized.

**Daryl requested that Susan follow up with Jamie on the authorization process.**

- ❖ **Last week our intake specialist called VO about a pending RRP authorization. She was told (By who I don't know – she didn't get the name) that MHA was allowing up to 7days to review an authorization request. I would like to know if this is accurate information.** This is with the answer above.

**Updates – Herb Cromwell:**

- ❖ **QuIP Updates**

2<sup>nd</sup> Year 1st quarter has been approved by MHA and Jarrell is in the process of getting those sent out.

- ❖ **Update on CRISP training.**

Karl is reconstructing the training due to the change of Regional Forums cancelling out ICD-10. It is on the list to do with the Regional Training's.

- ❖ **Other Issues and Announcements**

**The next Provider Quality Committee Meeting is scheduled for:  
Friday, June 13 2014 10 a.m.  
ValueOptions® Maryland  
1099 Winterson Road  
Linthicum, MD 21010**