**NORTHERN MICHIGAN REGIONAL ENTITY**

**PROVIDER NETWORK MANAGERS MEETING**

**10:00AM – MAY 14, 2024**

**VIA TEAMS**

|  |  |  |
| --- | --- | --- |
| **AuSable Valley:** | [x]  Mary Martin | Contract and Compliance Specialist |
|  | [ ]  Trish Otremba | Chief Quality Officer |
|  |
| **Centra Wellness:** | [x]  Chip Johnston | Executive Director |
|  | [x]  Kacey Kidder-Snyder | Provider Network Specialist |
|  | [x]  Pat Kozlowski | Access and Emergency Services Director |
|  |
| **North Country:** | [x]  Angie Balberde | Provider Network Manager |
|  | [x]  Katie Lorence | Contract Manager |
|  | [x]  Kim Rappleyea | Chief Operating Officer |
|  |
| **Northeast Michigan:** | [x]  Vicky DeRoven | Quality Improvement |
|  | [x]  Morgan Hale | Contract Manager |
|  | [ ]  Larry Patterson | Accounting Officer |
|  | [ ]  Jen Walburn | Compliance Officer |
|  |
| **Northern Lakes:** | [x]  Kari Barker | Director of Quality Improvement and Compliance |
|  | [x]  Mark Crane | Contract and Procurement Manager |
|  | [x]  Tiffany Fewins | Administrative Assistant |
|  | [x]  Jessica Williams | Performance Improvement Specialist |
|  |
| **NMRE:** | [x]  Carol Balousek | Executive Administrator |
|  | [ ]  Eric Kurtz | Chief Executive Officer |
|  | [ ]  Heidi McClenaghan | Quality Manager |
|  | [ ]  Brandon Rhue | Chief Information Officer/Operations Director |
|  | [x]  Chris VanWagoner | Provider Network Manager |

INTRODUCTIONS

Chris welcomed committee members to the meeting and attendance was taken. Katie Lorence, Contract Manager with North Country CMHA, was introduced to the group.

REVIEW AGENDA & ADDITIONS

No additions to the meeting agenda were requested.

APPROVAL OF PREVIOUS MEETING MINUTES

The April 9th minutes were included in the meeting materials and approved by consensus.

PRIOR ACTION ITEMS

There were no prior action items than the hospital follow-up, which appears later on the agenda.

REGIONAL DIRECTORIES

Chris will review all five CMHSPs’ Regional Directories again using the MDHHS PIHP Provider Directory Checklist by May 24th. Any issues will be communicated to the CMHSPs via email.

MINIMUM TRAINING REQUIREMENTS/NONPHYSICAL INTERVENTION

Centra Wellness has been in the process of switching training for contracted providers to Relias. Kacey referenced the minimum training requirements grid; she inquired about the Nonphysical Intervention training. Chris shared the 2024 CMH Staff Training Tool, which is used as part of the NMRE’s monitoring of the CMHSPs. All staff are required to have Nonphysical Intervention training within 90 days of hire. 42 CFR § 485.910(f)(2) states the following:

**(2)** ***Training content.*** The Community Mental Health Center (CMHC) must require all appropriate staff caring for clients to have appropriate education, training, and demonstrated knowledge based on the specific needs of the client population in at least the following:

(i) Techniques to identify staff and client behaviors, events, and environmental factors that may trigger circumstances that could require the use of restraint or seclusion.

(ii) The use of nonphysical intervention skills.

(iii) In facilities where restraint and seclusion are permitted, choosing the least restrictive intervention based on an individualized assessment of the client's medical and behavioral status or condition.

(iv) The safe application and use of all types of restraint or seclusion that are permitted in the CMHC, including training in how to recognize and respond to signs of physical and psychological distress.

(v) In facilities where restraint and seclusion are permitted, clinical identification of specific behavioral changes that indicate that restraint or seclusion is no longer necessary.

(vi) In facilities where restraint and seclusion are permitted, monitoring the physical and psychological well-being of the client who is restrained or secluded, including, but not limited to, respiratory and circulatory status, skin integrity, vital signs, and any special requirements specified by the CMHC’s policy.

Pat commented that the CFR requirement appears to be directed toward care given to individuals in facilities (hospitals) as an alternative to restraint or seclusion. Kari noted that MDHHS does not require Nonphysical Intervention training for all staff during the waiver review. Kim questioned whether this is intended to reference Nonviolent Crisis Intervention (physical management) training which is required by both the Mental Health Code and Administrative Rules. Chris agreed to initiate an internal conversation at the PIHP regarding this requirement.

HOSPITALS

**Kalamazoo NeuroPsychiatric Update**

A memorandum providing notice of rates for the new 64-bed Kalamazoo Behavioral Health facility was included in the March meeting materials. The facility is pending licensure, accreditation, and Medicare and Medicaid approval. A July 1st opening is tentatively planned. Chris has reached out to CEO, Cameron Gilbert, regarding future contracting and supplied the NMRE regional hospital boilerplate for review.

**Munson ECT Update**

Munson is adding an ECT program effective July 1st. Chris proposed an ECT rate to Munson but has not received a response to date.

**Other**

Kacey asked whether other are having trouble getting documentation back from Treva Smith for Trinity Health St. Mary’s and Trinity Health Muskegon/Hackley. The other CMHSPs did not report any issues. Chris will reach out to Treva Smith to determine the cause of the holdup.

Chris agreed to update the Hospital Contact list in Teams as Cady Loomis and Sharon Norris are currently the contacts for multiple hospitals.

**Tiered Rate Update**

Chris referenced the MDHHS Psychiatric Inpatient Fact Sheet distributed to EDIT during the meeting on April 18th. Effective July 1, 2024, there will be four new modifiers for inpatient psychiatric stays; these can be reported as early as April 1, 2024, but will not be required until July 1, 2024. For contracts where physician services are unbundled (i.e., not using 0100 revenue code), reporting will be required starting at a later date.

|  |  |
| --- | --- |
| Modifier | Description |
| V1 | Demonstration Modifier: Tier 1 – Normal staffing level |
| V2 | Demonstration Modifier: Tier 2 – 2:1 staffing ratio |
| V3 | Demonstration Modifier: Tier 3 – 1:1 staffing ratio |
| V4 | Demonstration Modifier: Tier 4 – 1:2 staffing ratio |

The goal of the proposed tiered rate methodology is to provide a standardized approach to payment increases that incentivize the provision of inpatient psychiatric services with enhanced staﬃng levels and improved access to care.

The NMRE and NorthCare Network do not intend to implement the tiered rates until a directive is received from CMS. Chris agreed to keep the Committee updated on this topic as more becomes known. Chip called the undertaking “completely unnecessary.”

FI MONITORING UPDATE

FI Monitoring tools can be found in the “Monitoring” file in Teams. The schedule for FY24 is as follows:

|  |  |
| --- | --- |
| Fiscal Intermediary | CMH |
| GT Independence | Northern Lakes |
| Stuart Wilson | AuSable Valley |
| HR Alliance | Centra Wellness |
| Karen’s Accounting  | Northeast Michigan |

Monitoring reviews should be completed within 364 days of the previous review.

EVV UPDATE

For Behavioral Health, the EVV applies to codes H2015 (Community Living Supports) and T1005 (Respite Care) with location code 12 (Home Location, other than a hospital or other facility, where the patient receives care in a private residence).

All applicable services providers (including Fiscal Intermediaries) should be enrolled in CHAMPS.

The reports that were completed by the CMHSPs in March will be used to schedule training and create the provider portals within the HHAeXchange system.

Weekly meetings are occurring with HHAX to discuss the implementation process; Brandon Rhue is attending on behalf of the NMRE. CMHSPs will be the points of contact for all their providers and will need to assist providers with understanding and getting access to and using the HHAX system.

It was noted that CMHSPs/PIHPs are not required to use HHAX to implement EVV; PCE Systems is looking to develop its own EVV system to interface with HHAX.

This topic will remain a standing agenda item until the EVV has been fully implemented on September 3 2024.

Chip also referred to this undertaking as “completely unnecessary.”

REGION 2 CONTRACT BOILERPLATE REVIEW

Chris would like to schedule a series of in-person meetings starting in June to begin the process of reviewing the regional Contract Boilerplates, as was done a few years ago. Mark requested the Specialized Residential (SRS) boilerplate be reviewed first. Chriss agreed to send a Doodle poll to reschedule the June meeting as the regularly scheduled date conflicts with the CMHAM Summer Conference.

CREDENTIALING REPORT

The Provider Credentialing report for Quarter 1 and Quarter 2 of FY24 are due to MDHHS on May 15th. The CMHSPs’ reports were due to the NMRE on May 8th. Chris clarified that the date of 10/01/2022 may be used as the prior credentialing date for organizational providers. The next credentialing report is due in November.

REGIONAL/STATEWIDE EVENTS, CONFERENCES, TRAININGS, NEWS

* **The NMRE** **Day of Education** – May 17th at Treetops Resort in Gaylord.
* **Northeast Michigan CMHA Mental Health 2K/5K/10K** – May 18th at 8:30AM in Alpena.
* **North Country CMHS “Splash of Color” Run/Walk** – May 18th at 9:00 in Petoskey.
* **CMHAM Improving Outcomes Conference** – May 16th – May 17th at Crystal Mountain.
* **Statewide Contract Manager Meeting** –May 22nd at 10:00AM.
* **HCBS Training opportunities** – May 30, 31
* **CMHAM Summer Conference** – June 11th – June 12th in Traverse City.
* **CMHAM SUD and Co-occurring Annual Conference** – September 16th – 17th in Novi and virtual.

GROUP TEAMS POSTS

Nothing additional was discussed related to group Teams posts.

OPEN DISCUSSION

Kim asked what boilerplate should be used for contracts with staff (Medical Director, Occupational Therapist, etc.). Chip responded that the Professional Individual template should be used. Another option would be to use an Employee Wage Contract. Kacey provided the following link to the IRS website: [Independent contractor (self-employed) or employee? | Internal Revenue Service (irs.gov)](https://www.irs.gov/businesses/small-businesses-self-employed/independent-contractor-self-employed-or-employee).

Kari requested that the NMRE’s policies and procedures be placed on the NMRE.org website, which will be done.

NEXT MEETING

Chris will be sending a Doodle poll to schedule a date for the June meeting.